

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 20:10
TIME 1-1-02
updated 3/11/97 2%

| | | | | | | |
|--|---|--|---|--|--------|---|
| ANSWERED | | | | Lab <input checked="" type="checkbox"/> | Safety | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Mike Willie</u> | | | | Was 333 called? <u>Yes</u> | | |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire | | <input checked="" type="checkbox"/> Release (amount <u>80 gal</u>) <input type="checkbox"/> Explosion <u>30% Phos Acid</u> | | Number of people injured <u>None</u> |
| Detailed Comments: <u>The 30% overflow tank overflowed.</u> | | | | | | |
| Area of emergency | <input type="checkbox"/> Calciner | <input checked="" type="checkbox"/> Phos | <input type="checkbox"/> Chem bldg | | | |
| | <input type="checkbox"/> (397) | <input type="checkbox"/> (345,371) | <input type="checkbox"/> (212,413,301,210) | | | |
| | <input type="checkbox"/> Wash Plant | <input type="checkbox"/> SPA | <input type="checkbox"/> Warehouse | | | |
| | <input type="checkbox"/> (248,249) | <input type="checkbox"/> (370) | <input type="checkbox"/> (338,396) | | | |
| | <input type="checkbox"/> N.E. Maint | <input type="checkbox"/> North H2SO4 | <input type="checkbox"/> Maint. Shop | | | |
| | <input type="checkbox"/> (251,412) | <input type="checkbox"/> (359) | <input type="checkbox"/> (221) | | | |
| | <input type="checkbox"/> Rollover & Reclaim | <input type="checkbox"/> East H2SO4 | <input type="checkbox"/> Shipping | | | |
| | <input type="checkbox"/> (232,236) | <input type="checkbox"/> (358) | <input type="checkbox"/> (348) | | | |
| | <input type="checkbox"/> E&I shop | <input type="checkbox"/> Silica | <input type="checkbox"/> NH3 Maint shop | | | |
| | <input type="checkbox"/> (258,268) | <input type="checkbox"/> (224,225,226) | <input type="checkbox"/> (423) | | | |
| <input type="checkbox"/> Ball Mill | <input type="checkbox"/> DAP | <input type="checkbox"/> Front offices | | | | |
| <input type="checkbox"/> (344) | <input type="checkbox"/> (227) | <input type="checkbox"/> (0,266) | | | | |
| <input type="checkbox"/> Pond | | <input type="checkbox"/> NH3 Sphere east or west | | | | |
| Nature of injuries <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other | | | | | | |
| Area of body affected <u>N/A</u> <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | | | |
| Do we Need? <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | | | |
| Wind direction & speed MPH <u>0</u> Cross out area that the wind is coming from. This will tell where to send the people to: Send to Zone No wind send to Zone 3 | | | | | | |
| Filled out by <u>[Signature]</u> As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. | | | Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West <input type="checkbox"/> South to North <input type="checkbox"/> West to East | | | |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein
John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 4/3/02
TIME 09:50
updated 3/11/97 2%

| | | | | |
|---|--|--|---|---|
| ANSWERED | | Lab <input checked="" type="checkbox"/> | Safety <input checked="" type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling | | <u>Lee Kunz</u> | | Was 333 called? <u>yes</u> |
| Nature of emergency | <input type="checkbox"/> Accident <input type="checkbox"/> Fire | <input type="checkbox"/> Release (amount <u>?</u>) <input type="checkbox"/> Explosion | Number of people injured <u>0</u> | |
| Detailed Comments: <u>Explosion joint in Phos by New Filters</u> | | | | |
| Area of emergency | <input type="checkbox"/> Calciner (397) <input type="checkbox"/> Wash Plant (248,249) <input type="checkbox"/> N.E. Maint (251,412) <input type="checkbox"/> Rollover & Reclaim (232,236) <input type="checkbox"/> E&I shop (258,268) <input type="checkbox"/> Ball Mill (344) <input type="checkbox"/> Pond | <input checked="" type="checkbox"/> Phos (345,371) <input type="checkbox"/> SPA (370) <input type="checkbox"/> North H2SO4 (359) <input type="checkbox"/> East H2SO4 (358) <input type="checkbox"/> Silica (224,225,226) <input type="checkbox"/> DAP (227) | <input type="checkbox"/> Chem bldg (212,413,301,210) <input type="checkbox"/> Warehouse (338,396) <input type="checkbox"/> Maint. Shop (221) <input type="checkbox"/> Shipping (348) <input type="checkbox"/> NH3 Maint shop (423) <input type="checkbox"/> Front offices (0,266) <input type="checkbox"/> NH3 Sphere east or west | |
| Nature of injuries | <input checked="" type="checkbox"/> None <input type="checkbox"/> Fall | <input type="checkbox"/> Thermal burn <input type="checkbox"/> Chemical burn | <input type="checkbox"/> Laceration <input type="checkbox"/> Other | |
| Area of body affected | <input type="checkbox"/> Eyes <input type="checkbox"/> Face & head <input type="checkbox"/> Neck | <input type="checkbox"/> Arms <input type="checkbox"/> Hands <input type="checkbox"/> Chest | <input type="checkbox"/> Back <input type="checkbox"/> Legs <input type="checkbox"/> Feet | |
| Do we Need? | <input type="checkbox"/> Ambulance <input type="checkbox"/> Other | <input type="checkbox"/> Evacuation <input type="checkbox"/> None | Emergency Response Team | |
| Wind direction & speed | <u>South</u> MPH <u>8</u> <u>To North</u> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <u> </u> No wind send to Zone 3 | | | |
| Filled out by | <u>John Kennedy</u> | | Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West <input type="checkbox"/> South to North <input type="checkbox"/> West to East | |
| As soon as the caller hangs up, they must come to the lab to guide the first aid people to the scene of the accident. | | | | |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein
John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

EMERGENCY PHONE CHECKLIST

Agrium CPO

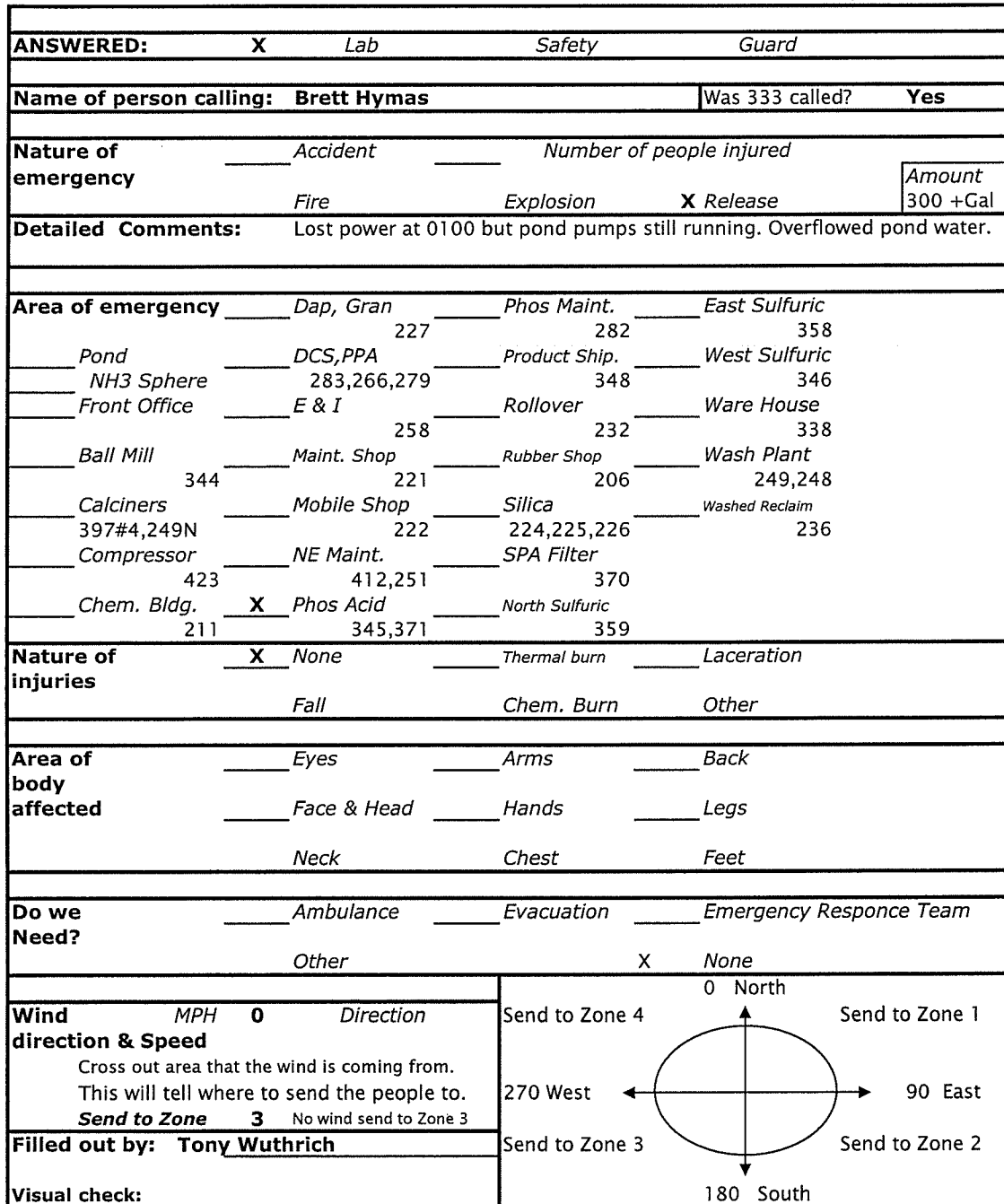
DATE 01/20/02

TIME 1608

| | | | | | | |
|--|--|--------------------------------|--|--|----------------------|----------------|
| ANSWERED | | | | Lab <u>x</u> | Safety <u> </u> | Guard <u>x</u> |
| Name of person calling | | | | <u>Brett Hymas</u> | | |
| Nature of emergency | | | | <u>Was 333 called?</u> | | |
| <u>Accident</u> | | | | <u>X</u> <u>Release (amount 100gal)</u> | | |
| <u>Fire</u> | | | | <u>Explosion</u> | | |
| Detailed Comments: | | | | <u>Pond Water spill 100 ft. west of DCS building</u> | | |
| Area of emergency | | | | | | |
| <u>Calciner</u> | | <u>X</u> <u>Phos</u> | | <u>Chem bldg</u> | | |
| <u>(397)</u> | | <u>(345,371)</u> | | <u>(212,413,301,210)</u> | | |
| <u>Wash Plant</u> | | <u>SPA</u> | | <u>Warehouse</u> | | |
| <u>(248,249)</u> | | <u>(370)</u> | | <u>(338,396)</u> | | |
| <u>N.E.Maint</u> | | <u>North H2SO4</u> | | <u>Maint. Shop</u> | | |
| <u>(251,412)</u> | | <u>(359)</u> | | <u>(221)</u> | | |
| <u>Rollover & Reclaim</u> | | <u>East H2SO4</u> | | <u>Shipping</u> | | |
| <u>(232,236)</u> | | <u>(358)</u> | | <u>(348)</u> | | |
| <u>E&I shop</u> | | <u>West H2SO4</u> | | <u>NH3 Maint shop</u> | | |
| <u>(258,268)</u> | | <u>(346)</u> | | <u>(423)</u> | | |
| <u>Ball Mill</u> | | <u>Silica</u> | | <u>Front offices</u> | | |
| <u>(344)</u> | | <u>(224,225,226)</u> | | <u>(0,266)</u> | | |
| <u>Pond</u> | | <u>DAP</u> | | <u>NH3 Sphere</u> | | |
| | | <u>(227)</u> | | <u>east or west</u> | | |
| Nature of injuries | | | | | | |
| <u>X</u> <u>None</u> | | <u>Thermal burn</u> | | <u>Laceration</u> | | |
| <u>Fall</u> | | <u>Chemical burn</u> | | <u>Other</u> | | |
| Area of body affected | | | | | | |
| <u>Eyes</u> | | <u>Arms</u> | | <u>Back</u> | | |
| <u>Face & head</u> | | <u>Hands</u> | | <u>Legs</u> | | |
| <u>Neck</u> | | <u>Chest</u> | | <u>Feet</u> | | |
| Do we Need? | | | | | | |
| <u>Ambulance</u> | | <u>Evacuation</u> | | <u>Emergency Response Team</u> | | |
| <u>Other</u> | | <u>X</u> <u>None</u> | | | | |
| Wind direction & speed | | | | | | |
| <u>192 deg MPH 17</u> | | | | | | |
| <u>Cross out area that the wind is coming from. This will tell where to send the people to.</u> | | | | | | |
| Send to Zone | | | | | | |
| <u>No wind send to Zone 3</u> | | | | | | |
| Filled out by | | Visual check | | | | |
| <u>Anthony Wuthrich</u> | | <u>X</u> <u>North to South</u> | | | | |
| <u>As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.</u> | | <u>East to West</u> | | | | |
| | | <u>South to North</u> | | | | |
| | | <u>West to East</u> | | | | |

Agrium CPO

updated 1/13/02



EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 1/30/02

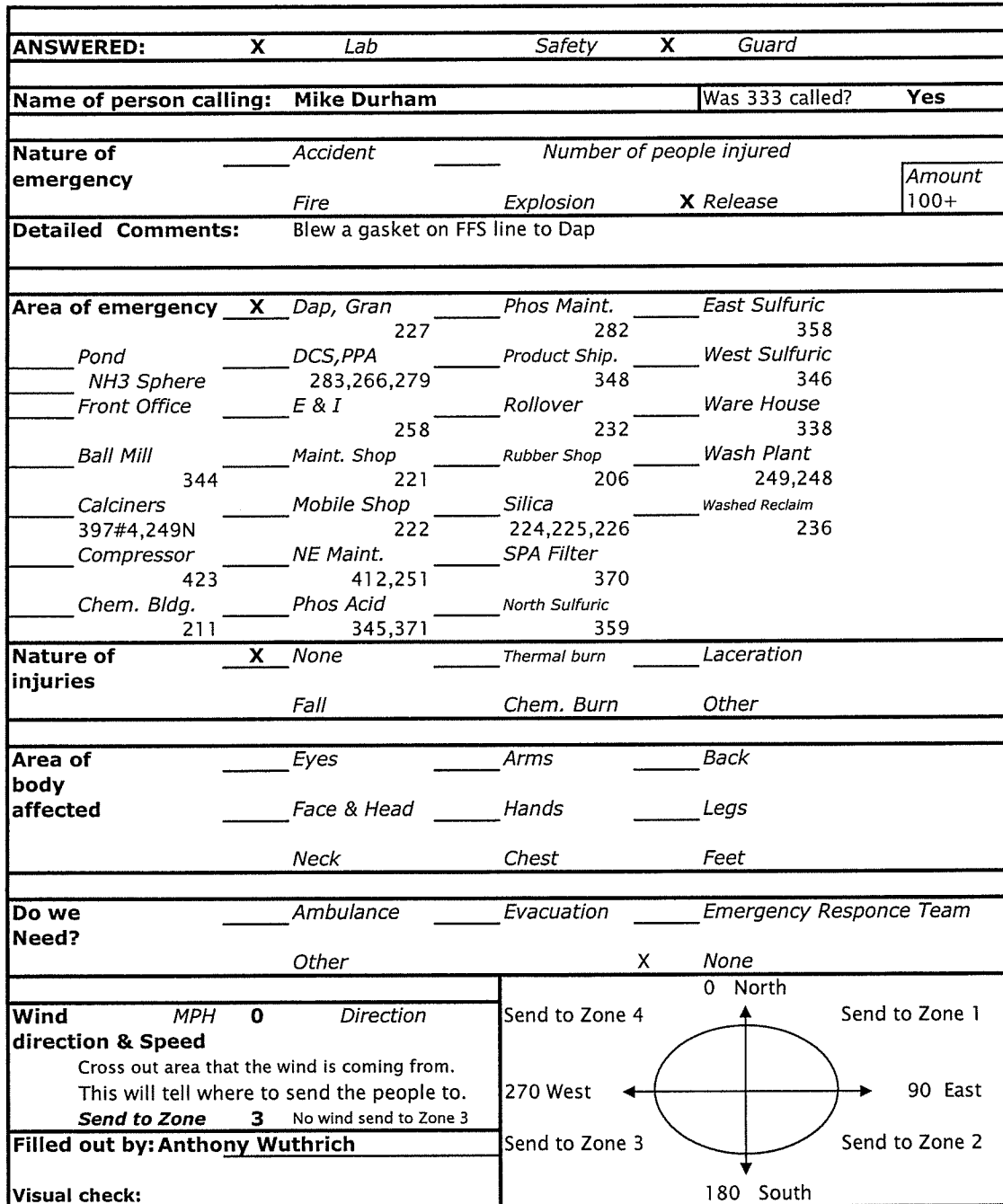
TIME 0002

updated 5-15-96

| | | | |
|---|---|--|--|
| ANSWERED | | | |
| Lab | <input checked="" type="checkbox"/> | Safety | |
| Guard | <input checked="" type="checkbox"/> | | |
| Name of person calling | | Brett Hymas | |
| | | Was 333 called? <input type="checkbox"/> Yes | |
| Nature of emergency | | | |
| <input type="checkbox"/> Accident | | <input checked="" type="checkbox"/> Release (amount 300 gal. Number of people injured) | |
| <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | |
| Detailed Comments | | | |
| Pond water spill caused by power loss. Lines drained to sump causing a release next to old ballmill and Phos scrubber | | | |
| Area of emergency | | | |
| <input type="checkbox"/> Calciner | <input type="checkbox"/> Phos | <input type="checkbox"/> Chem bldg | |
| <input type="checkbox"/> (397) | <input type="checkbox"/> (345,371) | <input type="checkbox"/> (212,413,301,210) | |
| <input type="checkbox"/> Wash Plant | <input checked="" type="checkbox"/> SPA | <input type="checkbox"/> Warehouse | |
| <input type="checkbox"/> (248,249) | <input type="checkbox"/> (370) | <input type="checkbox"/> (338,396) | |
| <input type="checkbox"/> N.E.Maint | <input type="checkbox"/> North H2SO4 | <input type="checkbox"/> Maint. Shop | |
| <input type="checkbox"/> (251,412) | <input type="checkbox"/> (359) | <input type="checkbox"/> (221) | |
| <input type="checkbox"/> Rollover & Reclaim | <input type="checkbox"/> East H2SO4 | <input type="checkbox"/> Shipping | |
| <input type="checkbox"/> (232,236) | <input type="checkbox"/> (358) | <input type="checkbox"/> (348) | |
| <input type="checkbox"/> E&I shop | <input type="checkbox"/> West H2SO4 | <input type="checkbox"/> NH3 Maint shop | |
| <input type="checkbox"/> (258,268) | <input type="checkbox"/> (346) | <input type="checkbox"/> (423) | |
| <input checked="" type="checkbox"/> Ball Mill | <input type="checkbox"/> Silica | <input type="checkbox"/> Front offices | |
| <input type="checkbox"/> (344) | <input type="checkbox"/> (224,225,226) | <input type="checkbox"/> (0,266) | |
| <input type="checkbox"/> Pond | <input type="checkbox"/> DAP | <input type="checkbox"/> NH3 Sphere | |
| | <input type="checkbox"/> (227) | <input type="checkbox"/> east or west | |
| Nature of injuries | | | |
| <input checked="" type="checkbox"/> None | | <input type="checkbox"/> Thermal burn | |
| <input type="checkbox"/> Fall | | <input type="checkbox"/> Laceration | |
| | | <input type="checkbox"/> Chemical burn | |
| | | <input type="checkbox"/> Other | |
| Area of body affected | | | |
| <input type="checkbox"/> Eyes | | <input type="checkbox"/> Arms | |
| <input type="checkbox"/> Face & head | | <input type="checkbox"/> Back | |
| <input type="checkbox"/> Neck | | <input type="checkbox"/> Hands | |
| | | <input type="checkbox"/> Legs | |
| | | <input type="checkbox"/> Feet | |
| Do we Need? | | | |
| <input type="checkbox"/> Ambulance | | <input type="checkbox"/> Evacuation | |
| <input type="checkbox"/> Other | | <input checked="" type="checkbox"/> Emergency Response Team | |
| <input type="checkbox"/> None | | | |
| Wind direction & speed | | | |
| MPH 2 | | | |
| Cross out area that the wind is coming from. This will tell where to send the people to. | | | |
| Send to Zone | | | |
| No wind send to Zone 3 | | | |
| Filled out by | | | |
| Howard Johnson | | | |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. | | | |
| Visual check | | | |
| <input type="checkbox"/> North to South | | <input type="checkbox"/> East to West | |
| <input type="checkbox"/> South to North | | <input type="checkbox"/> West to East | |

Agrium CPO

updated 1/13/02



EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 2/14/2002

TIME: 0345

updated 1/13/02

| | | | | | | |
|---|---|---|--|---|-------------------------------------|-------------------------------------|
| ANSWERED: | | <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <i>Guard</i> | <input checked="" type="checkbox"/> |
| Name of person calling: | | Brett Schaffer | | | Was 333 called? | yes |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | | | |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input type="checkbox"/> Release | <input checked="" type="checkbox"/> | Amount 150 gal | |
| Detailed Comments: A gasket in the FFS line from PPA to Granulation blew out causing a release of FFS on the ground next to the northeast corner of Phos enclosed loop system. | | | | | | |
| Area of emergency | <input type="checkbox"/> Dap, Gran | <input type="checkbox"/> Phos Maint. | <input type="checkbox"/> East Sulfuric | | | |
| | | 227 | 282 | 358 | | |
| | <input type="checkbox"/> Pond | <input type="checkbox"/> DCS, PPA | <input type="checkbox"/> Product Ship. | <input type="checkbox"/> West Sulfuric | | |
| | <input type="checkbox"/> NH3 Sphere | 283,266,279 | <input checked="" type="checkbox"/> | 348 | 346 | |
| | <input type="checkbox"/> Front Office | <input type="checkbox"/> E & I | <input type="checkbox"/> Rollover | <input type="checkbox"/> Ware House | | |
| | | 258 | 232 | 338 | | |
| | <input type="checkbox"/> Ball Mill | <input type="checkbox"/> Maint. Shop | <input type="checkbox"/> Rubber Shop | <input type="checkbox"/> Wash Plant | | |
| | 344 | 221 | 206 | 249,248 | | |
| | <input type="checkbox"/> Calciners | <input type="checkbox"/> Mobile Shop | <input type="checkbox"/> Silica | <input type="checkbox"/> Washed Reclaim | | |
| | 397#4,249N | 222 | 224,225,226 | 236 | | |
| | <input type="checkbox"/> Compressor | <input type="checkbox"/> NE Maint. | <input type="checkbox"/> SPA Filter | | | |
| | 423 | 412,251 | 370 | | | |
| | <input type="checkbox"/> Chem. Bldg. | <input type="checkbox"/> Phos Acid | <input type="checkbox"/> North Sulfuric | | | |
| | 211 | 345,371 | <input checked="" type="checkbox"/> | 359 | | |
| | Nature of injuries | <input type="checkbox"/> None | <input checked="" type="checkbox"/> | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | |
| <input type="checkbox"/> Fall | | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | | | |
| | | | | | | |
| Area of body affected | <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | | | |
| | N/A | | | | | |
| | <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | | | |
| | <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | | | |
| Do we Need? | <input type="checkbox"/> Ambulance | <input type="checkbox"/> Evacuation | <input type="checkbox"/> Emergency Response Team | | | |
| | <input type="checkbox"/> Other | <input type="checkbox"/> None | <input checked="" type="checkbox"/> | | | |
| Wind direction & Speed | MPH | Direction | | | | |
| | Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | | | |
| Filled out by: | | Howard Johnson | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 2/17/2002

TIME: 0955

updated 1/13/02

| | | | | |
|---|---|--|--|---|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Darrell Wright | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | <input type="checkbox"/> <i>Accident</i> | <input type="checkbox"/> <i>Number of people injured</i> | | |
| | <input type="checkbox"/> <i>Fire</i> | <input type="checkbox"/> <i>Explosion</i> | <input checked="" type="checkbox"/> <i>Release</i> | Amount 50 gal. |
| Detailed Comments: | | Oil Spill South of Nitrogen tank at PPA | | |
| Area of emergency | | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | <input type="checkbox"/> <i>Phos Maint.</i> | <input type="checkbox"/> <i>East Sulfuric</i> | | |
| <input type="checkbox"/> <i>Pond</i> | <input checked="" type="checkbox"/> <i>DCS, PPA</i> | <input type="checkbox"/> <i>Product Ship.</i> | <input type="checkbox"/> <i>West Sulfuric</i> | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | <input type="checkbox"/> <i>E & I</i> | <input type="checkbox"/> <i>Rollover</i> | <input type="checkbox"/> <i>Ware House</i> | |
| <input type="checkbox"/> <i>Front Office</i> | <input type="checkbox"/> <i>Maint. Shop</i> | <input type="checkbox"/> <i>Rubber Shop</i> | <input type="checkbox"/> <i>Wash Plant</i> | |
| <input type="checkbox"/> <i>Ball Mill</i> | <input type="checkbox"/> <i>Mobile Shop</i> | <input type="checkbox"/> <i>Silica</i> | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| <input type="checkbox"/> <i>Calciners</i> | <input type="checkbox"/> <i>NE Maint.</i> | <input type="checkbox"/> <i>SPA Filter</i> | | |
| <input type="checkbox"/> <i>397#4,249N</i> | <input type="checkbox"/> <i>Phos Acid</i> | <input type="checkbox"/> <i>North Sulfuric</i> | | |
| <input type="checkbox"/> <i>Compressor</i> | <input type="checkbox"/> <i>Chem. Bldg.</i> | | | |
| <input type="checkbox"/> <i>211</i> | | | | |
| Nature of injuries | | | | |
| <input checked="" type="checkbox"/> <i>None</i> | <input type="checkbox"/> <i>Thermal burn</i> | <input type="checkbox"/> <i>Laceration</i> | | |
| <input type="checkbox"/> <i>Fall</i> | <input type="checkbox"/> <i>Chem. Burn</i> | <input type="checkbox"/> <i>Other</i> | | |
| Area of body affected | | | | |
| <input type="checkbox"/> <i>Eyes</i> | <input type="checkbox"/> <i>Arms</i> | <input type="checkbox"/> <i>Back</i> | | |
| <input type="checkbox"/> <i>Face & Head</i> | <input type="checkbox"/> <i>Hands</i> | <input type="checkbox"/> <i>Legs</i> | | |
| <input type="checkbox"/> <i>Neck</i> | <input type="checkbox"/> <i>Chest</i> | <input type="checkbox"/> <i>Feet</i> | | |
| Do we Need? | | | | |
| <input type="checkbox"/> <i>Ambulance</i> | <input type="checkbox"/> <i>Evacuation</i> | <input type="checkbox"/> <i>Emergency Responce Team</i> | | |
| <input type="checkbox"/> <i>Other</i> | <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed | | | | |
| Cross out area that the wind is coming from. | | | | |
| This will tell where to send the people to. | | | | |
| Send to Zone 2 No wind send to Zone 3 | | | | |
| Filled out by: Anthony Wuthrich | | | | |
| Visual check: North to South | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 2/17/2002

TIME: 2120

updated 1/13/02

| | | | | | | |
|--|--|--|--|---|---------------------------------|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Frank Moore | | Was 333 called? Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | | <input checked="" type="checkbox"/> Release |
| Detailed Comments: | | Pond Water spilled, and getting cleaned up at the time call was made | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS, PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input checked="" type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> X <input type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West ← → 90 East Send to Zone 3 Send to Zone 2 180 South | | | | |
| Filled out by: John Connelly | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 4/14/2002

TIME: 1735

updated 1/13/02

| | | | | |
|--|---|---|--|---|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Orval Harris | | Was 333 called? Yes |
| Nature of emergency | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | |
| | <input type="checkbox"/> <i>Fire</i> | <input type="checkbox"/> <i>Explosion</i> | <input checked="" type="checkbox"/> <i>Release</i> | Amount 40 gallons |
| Detailed Comments: 30% Clarifier overflowed. | | | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> 227 <input type="checkbox"/> <i>Phos Maint.</i> 282 <input type="checkbox"/> <i>East Sulfuric</i> 358 <input type="checkbox"/> <i>Pond</i> <input type="checkbox"/> <i>DCS,PPA</i> 283,266,279 <input type="checkbox"/> <i>Product Ship.</i> 348 <input type="checkbox"/> <i>West Sulfuric</i> 346 <input type="checkbox"/> <i>NH3 Sphere</i> <input type="checkbox"/> <i>E & I</i> 258 <input type="checkbox"/> <i>Rollover</i> 232 <input type="checkbox"/> <i>Ware House</i> 338 <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>Maint. Shop</i> 221 <input type="checkbox"/> <i>Rubber Shop</i> 206 <input type="checkbox"/> <i>Wash Plant</i> 249,248 <input type="checkbox"/> <i>Ball Mill</i> 344 <input type="checkbox"/> <i>Mobile Shop</i> 222 <input type="checkbox"/> <i>Silica</i> 224,225,226 <input type="checkbox"/> <i>Washed Reclaim</i> 236 <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>NE Maint.</i> 412,251 <input type="checkbox"/> <i>SPA Filter</i> 370 <input type="checkbox"/> <i>397#4,249N</i> <input checked="" type="checkbox"/> <i>Phos Acid</i> 345,371 <input type="checkbox"/> <i>North Sulfuric</i> 359 <input type="checkbox"/> <i>Compressor</i> 423 <input type="checkbox"/> <i>Chem. Bldg.</i> 211 | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | <input type="checkbox"/> <i>Laceration</i> |
| | <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Chem. Burn</i> | <input type="checkbox"/> <i>Other</i> |
| Area of body affected | <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | <input type="checkbox"/> <i>Back</i> |
| | <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Hands</i> | <input type="checkbox"/> <i>Legs</i> |
| | <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Chest</i> | <input type="checkbox"/> <i>Feet</i> |
| Do we Need? | <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | <input type="checkbox"/> <i>Emergency Responce Team</i> |
| | <input type="checkbox"/> <i>Other</i> | | <input checked="" type="checkbox"/> <i>None</i> | |
| Wind direction & Speed MPH 20 Direction SW Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: Daren Maughan | | | | |
| Visual check: North to South | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/7/2002

TIME: 0110

updated 1/13/02

| | | | | | | |
|--|--|---|--|--|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | | | Dirk Stucki | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | | <input type="checkbox"/> <i>Amount</i> |
| | | <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | | <input checked="" type="checkbox"/> <i>Release</i> 50 Gallons |
| Detailed Comments: 70% acid spill at SPA. | | | | | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> <input type="checkbox"/> <i>Phos Maint.</i> <input type="checkbox"/> <i>East Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>Pond</i> <input type="checkbox"/> <i>DCS,PPA</i> <input type="checkbox"/> <i>Product Ship.</i> <input type="checkbox"/> <i>West Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> <input type="checkbox"/> <i>283,266,279</i> <input type="checkbox"/> <i>348</i> <input type="checkbox"/> <i>346</i> | | | | | | |
| <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>E & I</i> <input type="checkbox"/> <i>Rollover</i> <input type="checkbox"/> <i>Ware House</i> | | | | | | |
| <input type="checkbox"/> <i>Ball Mill</i> <input type="checkbox"/> <i>Maint. Shop</i> <input type="checkbox"/> <i>Rubber Shop</i> <input type="checkbox"/> <i>Wash Plant</i> | | | | | | |
| <input type="checkbox"/> <i>344</i> <input type="checkbox"/> <i>221</i> <input type="checkbox"/> <i>206</i> <input type="checkbox"/> <i>249,248</i> | | | | | | |
| <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>Mobile Shop</i> <input type="checkbox"/> <i>Silica</i> <input type="checkbox"/> <i>Washed Reclaim</i> | | | | | | |
| <input type="checkbox"/> <i>397#4,249N</i> <input type="checkbox"/> <i>222</i> <input type="checkbox"/> <i>224,225,226</i> <input type="checkbox"/> <i>236</i> | | | | | | |
| <input type="checkbox"/> <i>Compressor</i> <input type="checkbox"/> <i>NE Maint.</i> <input checked="" type="checkbox"/> <i>SPA Filter</i> | | | | | | |
| <input type="checkbox"/> <i>423</i> <input type="checkbox"/> <i>412,251</i> <input type="checkbox"/> <i>370</i> | | | | | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> <input type="checkbox"/> <i>Phos Acid</i> <input type="checkbox"/> <i>North Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>211</i> <input type="checkbox"/> <i>345,371</i> <input type="checkbox"/> <i>359</i> | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | | <input type="checkbox"/> <i>Laceration</i> |
| | | <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Chem. Burn</i> | | <input type="checkbox"/> <i>Other</i> |
| Area of body affected | | <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | | <input type="checkbox"/> <i>Back</i> |
| | | <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Hands</i> | | <input type="checkbox"/> <i>Legs</i> |
| | | <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Chest</i> | | <input type="checkbox"/> <i>Feet</i> |
| Do we Need? | | <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | | <input type="checkbox"/> <i>Emergency Responce Team</i> |
| | | <input type="checkbox"/> <i>Other</i> | | <input checked="" type="checkbox"/> <i>None</i> | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | | | | | |
| Filled out by: John W Conelly | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/21/2002

TIME: 0515

updated 1/13/02

| | | | | |
|--|--|---|--|---|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Dirk Stucki | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | Amount 16800 Gal |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | |
| Detailed Comments: 30% Acid spill in containment area at the 30% clarifier. | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> E & I 258 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 423 <input checked="" type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 <input type="checkbox"/> Chem. Bldg. 211 | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | |
| | <input type="checkbox"/> Fall | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | |
| Area of body affected | <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | |
| | <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | |
| | <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | |
| Do we Need? | <input type="checkbox"/> Ambulance | <input type="checkbox"/> Evacuation | <input type="checkbox"/> Emergency Response Team | |
| | <input type="checkbox"/> Other | <input checked="" type="checkbox"/> None | | |
| Wind MPH 2 Direction h to S Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: Daren Maughan | | | | |
| Visual check: North to South | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/29/2002

TIME:

updated 1/13/02

| | | | |
|--|---|---|--|
| ANSWERED: | | | |
| <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <i>Guard</i> <input checked="" type="checkbox"/> |
| Name of person calling: <i>Lee Kunz</i> | | | |
| | | Was 333 called? | yes |
| Nature of emergency | | | |
| <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | |
| <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | <input checked="" type="checkbox"/> <i>Release</i> |
| | | Amount <input checked="" type="checkbox"/> 50 Gal | |
| Detailed Comments: <i>Product Line Split Spraying Product onto the ground</i> | | | |
| Area of emergency | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | <input type="checkbox"/> <i>Phos Maint.</i> | <input type="checkbox"/> <i>East Sulfuric</i> | |
| <input type="checkbox"/> <i>Pond</i> | <input type="checkbox"/> <i>DCS,PPA</i> | <input type="checkbox"/> <i>Product Ship.</i> | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | <input type="checkbox"/> <i>283,266,279</i> | <input type="checkbox"/> <i>West Sulfuric</i> | |
| <input type="checkbox"/> <i>Front Office</i> | <input type="checkbox"/> <i>E & I</i> | <input type="checkbox"/> <i>Rollover</i> | |
| <input type="checkbox"/> <i>Ball Mill</i> | <input type="checkbox"/> <i>Maint. Shop</i> | <input type="checkbox"/> <i>Ware House</i> | |
| <input type="checkbox"/> <i>344</i> | <input type="checkbox"/> <i>221</i> | <input type="checkbox"/> <i>Wash Plant</i> | |
| <input type="checkbox"/> <i>Calciners</i> | <input type="checkbox"/> <i>Mobile Shop</i> | <input type="checkbox"/> <i>Silica</i> | |
| <input type="checkbox"/> <i>397#4,249N</i> | <input type="checkbox"/> <i>222</i> | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| <input type="checkbox"/> <i>Compressor</i> | <input type="checkbox"/> <i>NE Maint.</i> | <input type="checkbox"/> <i>SPA Filter</i> | |
| <input type="checkbox"/> <i>423</i> | <input type="checkbox"/> <i>412,251</i> | <input type="checkbox"/> <i>370</i> | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | <input type="checkbox"/> <i>Phos Acid</i> | <input checked="" type="checkbox"/> <i>North Sulfuric</i> | |
| <input type="checkbox"/> <i>211</i> | <input type="checkbox"/> <i>345,371</i> | <input type="checkbox"/> <i>359</i> | |
| Nature of injuries | | | |
| <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | |
| <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Laceration</i> | |
| <input type="checkbox"/> <i>Chem. Burn</i> | | <input type="checkbox"/> <i>Other</i> | |
| Area of body affected | | | |
| <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | |
| <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Back</i> | |
| <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Legs</i> | |
| <input type="checkbox"/> <i>Chest</i> | | <input type="checkbox"/> <i>Feet</i> | |
| Do we Need: | | | |
| <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | |
| <input type="checkbox"/> <i>Other</i> | | <input type="checkbox"/> <i>Emergency Response Team</i> | |
| <input type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed | | | |
| MPH | | | |
| Direction | | | |
| No Wind | | | |
| Cross out area that the wind is coming from. | | | |
| This will tell where to send the people to. | | | |
| Send to Zone 3 | | | |
| No wind send to Zone 3 | | | |
| Filled out by: <i>Howard Johnson</i> | | | |
| Visual check: | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 6/4/2002

TIME: 0445

updated 1/13/02

| | | | | |
|---|--|---|--|---|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Kim Crossley | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Number of people injured <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | Amount 500-600 gal |
| Detailed Comments: Broken Line | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input checked="" type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> E & I 258 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | |
| Nature of injuries <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West ← → 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: Brian Rowland | | | | |
| Visual check: | | | | |

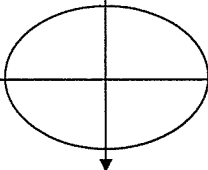
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 6/6/2002

TIME: 1355

updated 1/13/02

| | | | | | | | | | |
|--|--|--|--|--|-------------------------------------|--|-------------------------------------|--|-------------------------------------|
| ANSWERED: | | | | <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <input checked="" type="checkbox"/> | <i>Guard</i> | <input checked="" type="checkbox"/> |
| Name of person calling: | | | | Ron Parker | | Was 333 called? | | yes | |
| Nature of emergency | | | | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | | <input type="checkbox"/> <i>Amount</i> | |
| | | | | <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | | <input checked="" type="checkbox"/> <i>Release</i> 100 gal | |
| Detailed Comments: | | | | The rock slurry line was plugged. When they broke apart the line to unplug it it released acid and rock onto the ground. | | | | | |
| Area of emergency | | | | <input type="checkbox"/> <i>Dap, Gran</i> | | <input type="checkbox"/> <i>Phos Maint.</i> | | <input type="checkbox"/> <i>East Sulfuric</i> | |
| | | | | 227 | | 282 | | 358 | |
| <input type="checkbox"/> <i>Pond</i> | | | | <input type="checkbox"/> <i>DCS,PPA</i> | | <input type="checkbox"/> <i>Product Ship.</i> | | <input type="checkbox"/> <i>West Sulfuric</i> | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | | | | 283,266,279 | | 348 | | 346 | |
| <input type="checkbox"/> <i>Front Office</i> | | | | <input type="checkbox"/> <i>E & I</i> | | <input type="checkbox"/> <i>Rollover</i> | | <input type="checkbox"/> <i>Ware House</i> | |
| | | | | 258 | | 232 | | 338 | |
| <input type="checkbox"/> <i>Ball Mill</i> | | | | <input type="checkbox"/> <i>Maint. Shop</i> | | <input type="checkbox"/> <i>Rubber Shop</i> | | <input type="checkbox"/> <i>Wash Plant</i> | |
| 344 | | | | 221 | | 206 | | 249,248 | |
| <input type="checkbox"/> <i>Calciners</i> | | | | <input type="checkbox"/> <i>Mobile Shop</i> | | <input type="checkbox"/> <i>Silica</i> | | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| 397#4,249N | | | | 222 | | 224,225,226 | | 236 | |
| <input type="checkbox"/> <i>Compressor</i> | | | | <input type="checkbox"/> <i>NE Maint.</i> | | <input type="checkbox"/> <i>SPA Filter</i> | | <input type="checkbox"/> <i>PPA</i> x | |
| 423 | | | | 412,251 | | 370 | | 266 x | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | | | | <input type="checkbox"/> <i>Phos Acid</i> | | <input type="checkbox"/> <i>North Sulfuric</i> | | | |
| 211 | | | | 345,371 | | 359 | | | |
| Nature of injuries | | | | <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | | <input type="checkbox"/> <i>Laceration</i> | |
| | | | | <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Chem. Burn</i> | | <input type="checkbox"/> <i>Other</i> | |
| Area of body affected | | | | <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | | <input type="checkbox"/> <i>Back</i> | |
| | | | | <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Hands</i> | | <input type="checkbox"/> <i>Legs</i> | |
| | | | | <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Chest</i> | | <input type="checkbox"/> <i>Feet</i> | |
| Do we Need? | | | | <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | | <input type="checkbox"/> <i>Emergency Response Team</i> | |
| | | | | <input type="checkbox"/> <i>Other</i> | | <input type="checkbox"/> <i>None</i> | | <input checked="" type="checkbox"/> <i>x</i> | |
| Wind direction & Speed | | | | <div style="display: flex; justify-content: space-between;"> <div> <p><i>MPH</i> <i>Direction</i></p> <p>Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3</p> </div> <div> <p>Send to Zone 4 0 North Send to Zone 1</p> <p>270 West ←  90 East</p> <p>Send to Zone 3 180 South Send to Zone 2</p> </div> </div> | | | | | |
| Filled out by: | | | | Howard Johnson | | | | | |
| Visual check: | | | | | | | | | |

Agrium CPO

TIME: 0328

updated 1/13/02

NUW 006159

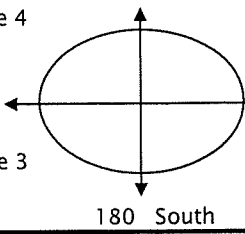
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 6/29/2002

TIME: 0110

updated 1/13/02

| | | | | |
|--|---------------------------------------|---|---|---|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Brett Schaffer | | Was 333 called? Yes |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | Amount 150 Gallons of 52% acic |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | |
| Detailed Comments: | | There was a release of 52% acid at the north car was at SPA. | | |
| Area of emergency | | | | |
| <input type="checkbox"/> Dap, Gran | <input type="checkbox"/> Phos Maint. | <input type="checkbox"/> East Sulfuric | | |
| <input type="checkbox"/> Pond | <input type="checkbox"/> DCS,PPA | <input type="checkbox"/> Product Ship. | <input type="checkbox"/> West Sulfuric | |
| <input type="checkbox"/> NH3 Sphere | <input type="checkbox"/> 283,266,279 | <input type="checkbox"/> 348 | <input type="checkbox"/> 346 | |
| <input type="checkbox"/> Front Office | <input type="checkbox"/> E & I | <input type="checkbox"/> Rollover | <input type="checkbox"/> Ware House | |
| <input type="checkbox"/> Ball Mill | <input type="checkbox"/> 258 | <input type="checkbox"/> 232 | <input type="checkbox"/> 338 | |
| <input type="checkbox"/> 344 | <input type="checkbox"/> Maint. Shop | <input type="checkbox"/> Rubber Shop | <input type="checkbox"/> Wash Plant | |
| <input type="checkbox"/> Calciners | <input type="checkbox"/> 221 | <input type="checkbox"/> 206 | <input type="checkbox"/> 249,248 | |
| <input type="checkbox"/> 397#4,249N | <input type="checkbox"/> Mobile Shop | <input type="checkbox"/> Silica | <input type="checkbox"/> Washed Reclaim | |
| <input type="checkbox"/> Compressor | <input type="checkbox"/> 222 | <input type="checkbox"/> 224,225,226 | <input type="checkbox"/> 236 | |
| <input type="checkbox"/> 423 | <input type="checkbox"/> NE Maint. | <input checked="" type="checkbox"/> SPA Filter | | |
| <input type="checkbox"/> Chem. Bldg. | <input type="checkbox"/> 412,251 | <input type="checkbox"/> 370 | | |
| <input type="checkbox"/> 211 | <input type="checkbox"/> Phos Acid | <input type="checkbox"/> North Sulfuric | | |
| <input type="checkbox"/> 345,371 | <input type="checkbox"/> 359 | | | |
| Nature of injuries | | | | |
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | | |
| <input type="checkbox"/> Fall | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | | |
| Area of body affected | | | | |
| <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | | |
| <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | | |
| <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | | |
| Do we Need? | | | | |
| <input type="checkbox"/> Ambulance | <input type="checkbox"/> Evacuation | <input type="checkbox"/> Emergency Responce Team | | |
| <input type="checkbox"/> Other | <input checked="" type="checkbox"/> X | <input type="checkbox"/> None | | |
| Wind direction & Speed | | <div style="display: flex; justify-content: space-between;"> <div> <p>MPH 3mph Direction lo. East</p> <p>Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3</p> </div> <div> <p>Send to Zone 4</p> <p>270 West</p> <p>Send to Zone 3</p> </div> <div> <p>0 North</p>  <p>90 East</p> <p>Send to Zone 2</p> <p>180 South</p> </div> </div> | | |
| Filled out by: Howard Johnson | | | | |
| Visual check: | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/10/2002

TIME: 1805

updated 1/13/02

| | | | |
|---|--|--|-----------------------------------|
| ANSWERED: <input checked="" type="checkbox"/> <i>Lab</i> <input type="checkbox"/> <i>Safety</i> <input checked="" type="checkbox"/> <i>Guard</i> | | | |
| Name of person calling: <u>Mike Willie</u> Was 333 called? <u>Yes</u> | | | |
| Nature of emergency <input type="checkbox"/> <i>Accident</i> <input type="checkbox"/> <i>Number of people injured</i> | | | |
| <input type="checkbox"/> <i>Fire</i> <input type="checkbox"/> <i>Explosion</i> <input checked="" type="checkbox"/> <i>Release</i> | | | Amount <u>20 gl 42%</u> |
| Detailed Comments: <u>loose flange on Tk 21 when removed acid was released onto ground.</u> | | | |
| Area of emergency | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | <input type="checkbox"/> <i>Phos Maint.</i> | <input type="checkbox"/> <i>East Sulfuric</i> | |
| <input type="checkbox"/> <i>Pond</i> | <input type="checkbox"/> <i>DCS,PPA</i> | <input type="checkbox"/> <i>Product Ship.</i> | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | <input type="checkbox"/> <i>283,266,279</i> | <input type="checkbox"/> <i>West Sulfuric</i> | |
| <input type="checkbox"/> <i>Front Office</i> | <input type="checkbox"/> <i>E & I</i> | <input type="checkbox"/> <i>Rollover</i> | |
| <input type="checkbox"/> <i>Ball Mill</i> | <input type="checkbox"/> <i>Maint. Shop</i> | <input type="checkbox"/> <i>Ware House</i> | |
| <input type="checkbox"/> <i>344</i> | <input type="checkbox"/> <i>221</i> | <input type="checkbox"/> <i>Wash Plant</i> | |
| <input type="checkbox"/> <i>Calciners</i> | <input type="checkbox"/> <i>Mobile Shop</i> | <input type="checkbox"/> <i>Silica</i> | |
| <input type="checkbox"/> <i>397#4,249N</i> | <input type="checkbox"/> <i>222</i> | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| <input type="checkbox"/> <i>Compressor</i> | <input type="checkbox"/> <i>NE Maint.</i> | <input type="checkbox"/> <i>SPA Filter</i> | |
| <input type="checkbox"/> <i>423</i> | <input type="checkbox"/> <i>412,251</i> | <input type="checkbox"/> <i>370</i> | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | <input checked="" type="checkbox"/> <i>Phos Acid</i> | <input type="checkbox"/> <i>North Sulfuric</i> | |
| <input type="checkbox"/> <i>211</i> | <input type="checkbox"/> <i>345,371</i> | <input type="checkbox"/> <i>359</i> | |
| Nature of injuries | | | |
| <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> | | | |
| <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | |
| Area of body affected | | | |
| <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> | | | |
| <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> | | | |
| <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | |
| Do we Need? | | | |
| <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> | | | |
| <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed | | | |
| <u>MPH 5 mph</u> <u>Direction east</u> | | | |
| Cross out area that the wind is coming from. This will tell where to send the people to. | | | |
| Send to Zone <u>No wind send to Zone 3</u> | | | |
| Filled out by: <u>Howard Johnson</u> | | | |
| Visual check: <u>West to North</u> | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/10/2002

TIME: 0845

updated 1/13/02

| | | | | | | |
|--|--|--|--|---|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Jeff Briggs | | Was 333 called? Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | Amount unknown |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | | |
| Detailed Comments: | | Gyp slurry and pond Water was released onto the ground at the new reactor building. | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> Ball Mill <input type="checkbox"/> Maint. Shop <input type="checkbox"/> Rubber Shop <input type="checkbox"/> Wash Plant <input type="checkbox"/> 344 <input type="checkbox"/> 221 <input type="checkbox"/> 206 <input type="checkbox"/> 249,248 <input type="checkbox"/> Calciners <input type="checkbox"/> Mobile Shop <input type="checkbox"/> Silica <input type="checkbox"/> Washed Reclaim <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> 236 <input type="checkbox"/> Compressor <input type="checkbox"/> NE Maint. <input type="checkbox"/> SPA Filter <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> Chem. Bldg. <input checked="" type="checkbox"/> Phos Acid <input type="checkbox"/> North Sulfuric <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | | | |
| Filled out by: Howard Johnson | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/16/2002

TIME: 1115

updated 1/13/02

| | | | | |
|--|--|--|---|--|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input checked="" type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Bob Gentry | | |
| | | Was 333 called? Yes | | |
| Nature of emergency | <input type="checkbox"/> <i>Accident</i> <input type="checkbox"/> <i>Number of people injured</i> | | | |
| | <input type="checkbox"/> <i>Fire</i> <input type="checkbox"/> <i>Explosion</i> <input checked="" type="checkbox"/> <i>Release</i> | | Amount 600-1000gals | |
| Detailed Comments: The extractor overflowed | | | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> <input type="checkbox"/> <i>Phos Maint.</i> <input type="checkbox"/> <i>East Sulfuric</i> | | | | |
| | | 227 | 282 | 358 |
| <input type="checkbox"/> <i>Pond</i> | <input checked="" type="checkbox"/> <i>DCS,PPA</i> | <input type="checkbox"/> <i>Product Ship.</i> | | <input type="checkbox"/> <i>West Sulfuric</i> |
| <input type="checkbox"/> <i>NH3 Sphere</i> | 283,266,279 | 348 | 346 | |
| <input type="checkbox"/> <i>Front Office</i> | <input type="checkbox"/> <i>E & I</i> | <input type="checkbox"/> <i>Rollover</i> | <input type="checkbox"/> <i>Ware House</i> | |
| | 258 | 232 | 338 | |
| <input type="checkbox"/> <i>Ball Mill</i> | <input type="checkbox"/> <i>Maint. Shop</i> | <input type="checkbox"/> <i>Rubber Shop</i> | <input type="checkbox"/> <i>Wash Plant</i> | |
| 344 | 221 | 206 | 249,248 | |
| <input type="checkbox"/> <i>Calciners</i> | <input type="checkbox"/> <i>Mobile Shop</i> | <input type="checkbox"/> <i>Silica</i> | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| 397#4,249N | 222 | 224,225,226 | 236 | |
| <input type="checkbox"/> <i>Compressor</i> | <input type="checkbox"/> <i>NE Maint.</i> | <input type="checkbox"/> <i>SPA Filter</i> | | |
| 423 | 412,251 | 370 | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | <input type="checkbox"/> <i>Phos Acid</i> | <input type="checkbox"/> <i>North Sulfuric</i> | | |
| 211 | 345,371 | 359 | | |
| Nature of injuries | <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> | | | |
| | <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | |
| Area of body affected | <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> | | | |
| | <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> | | | |
| | <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | |
| Do we Need? | <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> | | | |
| | <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed MPH 3 Direction nw Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: David Hirsbrunner | | | | |
| Visual check: South to North | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/26/2002

TIME: 0930

updated 1/13/02

| | | | | | | |
|---|--|--|--|---|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Lee Kunz | | Was 333 called? Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | Number of people injured Amount 25 gals | | |
| Detailed Comments: Therminol spill from #2 Super unit. | | | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran <input type="checkbox"/> Phos Maint. <input type="checkbox"/> East Sulfuric <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> Ball Mill <input type="checkbox"/> 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> 344 <input type="checkbox"/> Maint. Shop <input type="checkbox"/> Rubber Shop <input type="checkbox"/> Wash Plant <input type="checkbox"/> Calciners <input type="checkbox"/> Mobile Shop <input type="checkbox"/> Silica <input type="checkbox"/> 249,248 <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> Washed Reclaim <input type="checkbox"/> Compressor <input type="checkbox"/> NE Maint. <input type="checkbox"/> SPA Filter <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> Chem. Bldg. <input checked="" type="checkbox"/> Phos Acid <input type="checkbox"/> North Sulfuric <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West ← → 90 East Send to Zone 3 Send to Zone 2 180 South | | | | |
| Filled out by: Daren Maughan | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/27/2002

TIME: 0425

updated 1/13/02

| | | | |
|--|--|--|-----------------------------|
| ANSWERED: <input checked="" type="checkbox"/> <i>Lab</i> <input type="checkbox"/> <i>Safety</i> <input checked="" type="checkbox"/> <i>Guard</i> | | | |
| Name of person calling: Matt Thomas Was 333 called? Yes | | | |
| Nature of emergency <input type="checkbox"/> <i>Accident</i> <input type="checkbox"/> <i>Number of people injured</i> | | | |
| <i>Fire</i> <input type="checkbox"/> <i>Explosion</i> <input type="checkbox"/> <i>Release</i> <input checked="" type="checkbox"/> | | | Amount 50 Gallons |
| Detailed Comments: They were pumping thermal from the # 2 super unit into the thermal storage tank, when the thermal came out of the tank. The cause was undetermined at the time of the call to 333. | | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> <input type="checkbox"/> <i>Phos Maint.</i> <input type="checkbox"/> <i>East Sulfuric</i> | | | |
| <input type="checkbox"/> <i>Pond</i> <input type="checkbox"/> <i>DCS,PPA</i> <input type="checkbox"/> <i>Product Ship.</i> <input type="checkbox"/> <i>West Sulfuric</i> | | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> <input type="checkbox"/> <i>283,266,279</i> <input type="checkbox"/> <i>348</i> <input type="checkbox"/> <i>346</i> | | | |
| <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>E & I</i> <input type="checkbox"/> <i>Rollover</i> <input type="checkbox"/> <i>Ware House</i> | | | |
| <input type="checkbox"/> <i>Ball Mill</i> <input type="checkbox"/> <i>Maint. Shop</i> <input type="checkbox"/> <i>Rubber Shop</i> <input type="checkbox"/> <i>Wash Plant</i> | | | |
| <input type="checkbox"/> <i>344</i> <input type="checkbox"/> <i>221</i> <input type="checkbox"/> <i>206</i> <input type="checkbox"/> <i>249,248</i> | | | |
| <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>Mobile Shop</i> <input type="checkbox"/> <i>Silica</i> <input type="checkbox"/> <i>Washed Reclaim</i> | | | |
| <input type="checkbox"/> <i>397#4,249N</i> <input type="checkbox"/> <i>222</i> <input type="checkbox"/> <i>224,225,226</i> <input type="checkbox"/> <i>236</i> | | | |
| <input type="checkbox"/> <i>Compressor</i> <input type="checkbox"/> <i>NE Maint.</i> <input type="checkbox"/> <i>SPA Filter</i> | | | |
| <input type="checkbox"/> <i>423</i> <input type="checkbox"/> <i>412,251</i> <input type="checkbox"/> <i>370</i> | | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> <input checked="" type="checkbox"/> <i>Phos Acid</i> <input type="checkbox"/> <i>North Sulfuric</i> | | | |
| <input type="checkbox"/> <i>211</i> <input type="checkbox"/> <i>345,371</i> <input type="checkbox"/> <i>359</i> | | | |
| Nature of injuries <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> | | | |
| <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | |
| Area of body affected <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> | | | |
| <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> | | | |
| <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | |
| Do we Need? <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> | | | |
| <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | |
| Filled out by: Hubert Hazelett | | | |
| Visual check: South to North | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/1/2002

TIME: 0000

updated 1/13/02

| | | | | | | |
|--|--|---|-------------------------------------|--|-----------------|-------------------------------------|
| ANSWERED: | | <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <i>Guard</i> | <input checked="" type="checkbox"/> |
| Name of person calling: | | BILL YOUNG | | | Was 333 called? | YES |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | | | |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input type="checkbox"/> Release | <input checked="" type="checkbox"/> Amount | 150 Gal. | |
| Detailed Comments: | | Washing out a lamella when the drain clogged. It flowed in the N.W. corner of the old Phos building then out into the road. | | | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> <input type="checkbox"/> <i>Phos Maint.</i> <input type="checkbox"/> <i>East Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>Pond</i> <input type="checkbox"/> <i>DCS,PPA</i> <input type="checkbox"/> <i>Product Ship.</i> <input type="checkbox"/> <i>West Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> <input type="checkbox"/> <i>283,266,279</i> <input type="checkbox"/> <i>348</i> <input type="checkbox"/> <i>346</i> | | | | | | |
| <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>E & I</i> <input type="checkbox"/> <i>Rollover</i> <input type="checkbox"/> <i>Ware House</i> | | | | | | |
| <input type="checkbox"/> <i>Ball Mill</i> <input type="checkbox"/> <i>Maint. Shop</i> <input type="checkbox"/> <i>Rubber Shop</i> <input type="checkbox"/> <i>Wash Plant</i> | | | | | | |
| <input type="checkbox"/> <i>344</i> <input type="checkbox"/> <i>221</i> <input type="checkbox"/> <i>206</i> <input type="checkbox"/> <i>249,248</i> | | | | | | |
| <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>Mobile Shop</i> <input type="checkbox"/> <i>Silica</i> <input type="checkbox"/> <i>Washed Reclaim</i> | | | | | | |
| <input type="checkbox"/> <i>397#4,249N</i> <input type="checkbox"/> <i>222</i> <input type="checkbox"/> <i>224,225,226</i> <input type="checkbox"/> <i>236</i> | | | | | | |
| <input type="checkbox"/> <i>Compressor</i> <input type="checkbox"/> <i>NE Maint.</i> <input type="checkbox"/> <i>SPA Filter</i> | | | | | | |
| <input type="checkbox"/> <i>423</i> <input type="checkbox"/> <i>412,251</i> <input type="checkbox"/> <i>370</i> | | | | | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> <input checked="" type="checkbox"/> <i>Phos Acid</i> <input type="checkbox"/> <i>North Sulfuric</i> | | | | | | |
| <input type="checkbox"/> <i>211</i> <input type="checkbox"/> <i>345,371</i> <input type="checkbox"/> <i>359</i> | | | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Thermal burn | | | | |
| | <input type="checkbox"/> Fall | <input type="checkbox"/> Chem. Burn | | | | |
| Area of body affected | <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | | | |
| | <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | | | |
| | <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | | | |
| Do we Need? <input checked="" type="checkbox"/> <i>No Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> | | | | | | |
| <input type="checkbox"/> <i>Other</i> <input type="checkbox"/> <i>None</i> | | | | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | | | |
| Filled out by: Hubert H. Hazlett | | | | | | |
| Visual check: | | | | | | |

Agrium CPO

TIME: 1413

updated 1/13/02

NUW 006167

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/13/2002

TIME: 0925

updated 1/13/02

| | | | | | | |
|--|--|--|--|--|---|--|
| ANSWERED: | | | | <input checked="" type="checkbox"/> <i>Lab</i> | <input checked="" type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: Terry Wallentine | | | | Was 333 called? | | Yes |
| Nature of emergency | | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | | |
| | | <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | | <input checked="" type="checkbox"/> <i>Release</i> |
| | | | | | | Amount 50 Gal |
| Detailed Comments: PPA Loadout - overflow from truck in containment - meter problem | | | | | | |
| Area of emergency | | | | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> 227 <input type="checkbox"/> <i>Phos Maint.</i> 282 <input type="checkbox"/> <i>East Sulfuric</i> 358 <input type="checkbox"/> <i>Pond</i> <input type="checkbox"/> <i>DCS,PPA</i> <input type="checkbox"/> <i>Product Ship.</i> <input type="checkbox"/> <i>West Sulfuric</i> <input type="checkbox"/> <i>NH3 Sphere</i> 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>E & I</i> <input type="checkbox"/> <i>Rollover</i> <input type="checkbox"/> <i>Ware House</i> <input type="checkbox"/> 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> <i>Ball Mill</i> <input type="checkbox"/> <i>Maint. Shop</i> <input type="checkbox"/> <i>Rubber Shop</i> <input type="checkbox"/> <i>Wash Plant</i> <input type="checkbox"/> 344 <input type="checkbox"/> 221 <input type="checkbox"/> 206 <input type="checkbox"/> 249,248 <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>Mobile Shop</i> <input type="checkbox"/> <i>Silica</i> <input type="checkbox"/> <i>Washed Reclaim</i> <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> 236 <input type="checkbox"/> <i>Compressor</i> <input type="checkbox"/> <i>NE Maint.</i> <input type="checkbox"/> <i>SPA Filter</i> <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> <i>Chem. Bldg.</i> <input type="checkbox"/> <i>Phos Acid</i> <input type="checkbox"/> <i>North Sulfuric</i> <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | | | |
| Nature of injuries | | | | | | |
| <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | | | | |
| Area of body affected | | | | | | |
| <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | | | | |
| Do we Need? | | | | | | |
| <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | | | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: Brian Rowland | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/17/2002

TIME: 0711

updated 1/13/02

| | | | | |
|--|--|--|---------------------------------|---|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Mike Willie | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | |
| | | Number of people injured | | Amount 40 Gal |
| Detailed Comments: | | Broken line S of Grade Control and DAP | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA <input checked="" type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I 258 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Calciners 397#4,249N 222 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> North Sulfuric 359 <input type="checkbox"/> Chem. Bldg. 211 <input checked="" type="checkbox"/> Phos Acid 345,371 | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | | | |
| Filled out by: Brian Rowland | | | | |
| Visual check: | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/17/2002

TIME: 1825

updated 1/13/02

| | | | |
|---|---|--|--|
| ANSWERED: <input checked="" type="checkbox"/> <i>Lab</i> <input type="checkbox"/> <i>Safety</i> <input checked="" type="checkbox"/> <i>Guard</i> | | | |
| Name of person calling: <u>Jeff Briggs</u> | | Was 333 called? <u>Yes</u> | |
| Nature of emergency <input type="checkbox"/> <i>Accident</i> <input type="checkbox"/> <i>Number of people injured</i> | | <input type="checkbox"/> <i>Amount</i> | |
| <input type="checkbox"/> <i>Fire</i> <input type="checkbox"/> <i>Explosion</i> <input checked="" type="checkbox"/> <i>Release</i> | | <u>3 gal</u> | |
| Detailed Comments: <u>4 leaks in sulfuric line between phos and sulfuric @1500</u> | | | |
| Area of emergency | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | <input type="checkbox"/> <i>Phos Maint.</i> | <input type="checkbox"/> <i>East Sulfuric</i> | |
| <input type="checkbox"/> <i>Pond</i> | <input type="checkbox"/> <i>DCS,PPA</i> | <input type="checkbox"/> <i>West Sulfuric</i> | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | <input type="checkbox"/> <i>Product Ship.</i> | <input type="checkbox"/> <i>Ware House</i> | |
| <input type="checkbox"/> <i>Front Office</i> | <input type="checkbox"/> <i>E & I</i> | <input type="checkbox"/> <i>Rollover</i> | |
| <input type="checkbox"/> <i>Ball Mill</i> | <input type="checkbox"/> <i>Maint. Shop</i> | <input type="checkbox"/> <i>Wash Plant</i> | |
| <input type="checkbox"/> <i>Calciners</i> | <input type="checkbox"/> <i>Mobile Shop</i> | <input type="checkbox"/> <i>Silica</i> | |
| <input type="checkbox"/> <i>397#4,249N</i> | <input type="checkbox"/> <i>NE Maint.</i> | <input type="checkbox"/> <i>SPA Filter</i> | |
| <input type="checkbox"/> <i>Compressor</i> | <input type="checkbox"/> <i>Phos Acid</i> | <input type="checkbox"/> <i>North Sulfuric</i> | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | <input type="checkbox"/> <i>Phos Acid</i> | <input type="checkbox"/> <i>Washed Reclaim</i> | |
| <input type="checkbox"/> <i>211</i> | <input type="checkbox"/> <i>345,371</i> | <input type="checkbox"/> <i>359</i> | |
| Nature of injuries | | | |
| <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> | | | |
| <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | |
| Area of body affected | | | |
| <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> | | | |
| <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> | | | |
| <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | |
| Do we Need? | | | |
| <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Response Team</i> | | | |
| <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed | | | |
| MPH <u>0</u> Direction | | | |
| Cross out area that the wind is coming from. This will tell where to send the people to. | | | |
| Send to Zone <u>3</u> No wind send to Zone 3 | | | |
| Filled out by: <u>John Connelly</u> | | | |
| Visual check: | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/18/2002

TIME: 2128

updated 1/13/02

| | | | | |
|---|--|--|---|---|
| ANSWERED: | | <input checked="" type="checkbox"/> <i>Lab</i> | <input type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: | | Bob Gentry | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | <input type="checkbox"/> <i>Accident</i> <input type="checkbox"/> <i>Number of people injured</i> | | <input type="checkbox"/> <i>Fire</i> <input type="checkbox"/> <i>Explosion</i> <input checked="" type="checkbox"/> <i>Release</i> | |
| Detailed Comments: | | H2S release the operators are in SCBA gear. Response team be on alert. | | |
| Area of emergency <input type="checkbox"/> <i>Dap, Gran</i> <input type="checkbox"/> <i>Phos Maint.</i> <input type="checkbox"/> <i>East Sulfuric</i> | | | | |
| <input type="checkbox"/> <i>Pond</i> <input checked="" type="checkbox"/> <i>DCS,PPA</i> <input type="checkbox"/> <i>Product Ship.</i> <input type="checkbox"/> <i>West Sulfuric</i> | | | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> <input type="checkbox"/> <i>283,266,279</i> <input type="checkbox"/> <i>348</i> <input type="checkbox"/> <i>346</i> | | | | |
| <input type="checkbox"/> <i>Front Office</i> <input type="checkbox"/> <i>E & I</i> <input type="checkbox"/> <i>Rollover</i> <input type="checkbox"/> <i>Ware House</i> | | | | |
| <input type="checkbox"/> <i>Ball Mill</i> <input type="checkbox"/> <i>Maint. Shop</i> <input type="checkbox"/> <i>Rubber Shop</i> <input type="checkbox"/> <i>Wash Plant</i> | | | | |
| <input type="checkbox"/> <i>344</i> <input type="checkbox"/> <i>221</i> <input type="checkbox"/> <i>206</i> <input type="checkbox"/> <i>249,248</i> | | | | |
| <input type="checkbox"/> <i>Calciners</i> <input type="checkbox"/> <i>Mobile Shop</i> <input type="checkbox"/> <i>Silica</i> <input type="checkbox"/> <i>Washed Reclaim</i> | | | | |
| <input type="checkbox"/> <i>397#4,249N</i> <input type="checkbox"/> <i>222</i> <input type="checkbox"/> <i>224,225,226</i> <input type="checkbox"/> <i>236</i> | | | | |
| <input type="checkbox"/> <i>Compressor</i> <input type="checkbox"/> <i>NE Maint.</i> <input type="checkbox"/> <i>SPA Filter</i> | | | | |
| <input type="checkbox"/> <i>423</i> <input type="checkbox"/> <i>412,251</i> <input type="checkbox"/> <i>370</i> | | | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> <input type="checkbox"/> <i>Phos Acid</i> <input type="checkbox"/> <i>North Sulfuric</i> | | | | |
| <input type="checkbox"/> <i>211</i> <input type="checkbox"/> <i>345,371</i> <input type="checkbox"/> <i>359</i> | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> <i>None</i> <input type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> <i>Laceration</i> | | | |
| | <input type="checkbox"/> <i>Fall</i> <input type="checkbox"/> <i>Chem. Burn</i> <input type="checkbox"/> <i>Other</i> | | | |
| Area of body affected | <input type="checkbox"/> <i>Eyes</i> <input type="checkbox"/> <i>Arms</i> <input type="checkbox"/> <i>Back</i> | | | |
| | <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Legs</i> | | | |
| | <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> <i>Feet</i> | | | |
| Do we Need? | <input type="checkbox"/> <i>Ambulance</i> <input type="checkbox"/> <i>Evacuation</i> <input type="checkbox"/> <i>Emergency Responce Team</i> | | | |
| | <input type="checkbox"/> <i>Other</i> <input checked="" type="checkbox"/> <i>None</i> | | | |
| Wind direction & Speed MPH 3 Direction it to n Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: Brian Rowland | | | | |
| Visual check: North to South | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/19/2002

TIME: 1746

updated 1/13/02

| | | | | | | |
|---|--|--------------------------------------|--|--|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: Brett Hymas | | | | Was 333 called? | | Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | Amount 300 gal |
| Detailed Comments: | | | | Pond water spilled by new filter building | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> E & I 258 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input checked="" type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | | | |
| Nature of injuries | | <input type="checkbox"/> None | | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | |
| | | <input type="checkbox"/> Fall | | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | |
| Area of body affected | | <input type="checkbox"/> Eyes | | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | |
| | | <input type="checkbox"/> Face & Head | | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | |
| | | <input type="checkbox"/> Neck | | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | |
| Do we Need? | | <input type="checkbox"/> Ambulance | | <input type="checkbox"/> Evacuation | <input type="checkbox"/> Emergency Response Team | |
| | | <input type="checkbox"/> Other | | <input checked="" type="checkbox"/> X | <input type="checkbox"/> None | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: John Connelly | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/27/2002

TIME: 1530

updated 1/13/02

| | | | | | | |
|---|--|---|--|--|---|--|
| ANSWERED: | | | | <input checked="" type="checkbox"/> <i>Lab</i> | <input checked="" type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: Lee Kunz | | | | Was 333 called? Yes | | |
| Nature of emergency | | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | | |
| | | <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | | <input checked="" type="checkbox"/> <i>Release</i> |
| Detailed Comments: | | Gyp/Pond H2O spill in the filter building. | | | | |
| Area of emergency | | | | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | | <input type="checkbox"/> <i>Phos Maint.</i> | | <input type="checkbox"/> <i>East Sulfuric</i> | | |
| 227 | | 282 | | 358 | | |
| <input type="checkbox"/> <i>Pond</i> | | <input type="checkbox"/> <i>DCS,PPA</i> | | <input type="checkbox"/> <i>Product Ship.</i> | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | | 283,266,279 | | 348 | | |
| <input type="checkbox"/> <i>Front Office</i> | | <input type="checkbox"/> <i>E & I</i> | | <input type="checkbox"/> <i>Rollover</i> | | |
| 258 | | 232 | | <input type="checkbox"/> <i>Ware House</i> | | |
| <input type="checkbox"/> <i>Ball Mill</i> | | <input type="checkbox"/> <i>Maint. Shop</i> | | <input type="checkbox"/> <i>Rubber Shop</i> | | |
| 344 | | 221 | | 206 | | |
| <input type="checkbox"/> <i>Calciners</i> | | <input type="checkbox"/> <i>Mobile Shop</i> | | <input type="checkbox"/> <i>Silica</i> | | |
| 397#4,249N | | 222 | | 224,225,226 | | |
| <input type="checkbox"/> <i>Compressor</i> | | <input type="checkbox"/> <i>NE Maint.</i> | | <input type="checkbox"/> <i>SPA Filter</i> | | |
| 423 | | 412,251 | | 370 | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | | <input checked="" type="checkbox"/> <i>Phos Acid</i> | | <input type="checkbox"/> <i>North Sulfuric</i> | | |
| 211 | | 345,371 | | 359 | | |
| Nature of injuries | | | | | | |
| <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | | <input type="checkbox"/> <i>Laceration</i> | | |
| <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Chem. Burn</i> | | <input type="checkbox"/> <i>Other</i> | | |
| Area of body affected | | | | | | |
| <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | | <input type="checkbox"/> <i>Back</i> | | |
| <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Hands</i> | | <input type="checkbox"/> <i>Legs</i> | | |
| <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Chest</i> | | <input type="checkbox"/> <i>Feet</i> | | |
| Do we Need? | | | | | | |
| <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | | <input type="checkbox"/> <i>Emergency Responce Team</i> | | |
| <input type="checkbox"/> <i>Other</i> | | <input checked="" type="checkbox"/> <i>None</i> | | | | |
| Wind direction & Speed | | <div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div> | | | | |
| MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | | | | | |
| Filled out by: Daren Maughan | | | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/3/2002

TIME: 0612

updated 1/13/02

| | | | | | | |
|--|--|--|--|--|---------------------------------|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Randy Peterson | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> 0 | | Number of people injured |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | | <input checked="" type="checkbox"/> Release |
| Detailed Comments: | | Tk 52 leak | | | | |
| Area of emergency | | | | | | |
| <input type="checkbox"/> Dap, Gran | | <input type="checkbox"/> Phos Maint. | | <input type="checkbox"/> East Sulfuric | | |
| 227 | | 282 | | 358 | | |
| <input type="checkbox"/> Pond | | <input type="checkbox"/> DCS,PPA | | <input type="checkbox"/> Product Ship. | | |
| 283,266,279 | | 348 | | 346 | | |
| <input type="checkbox"/> NH3 Sphere | | <input type="checkbox"/> E & I | | <input type="checkbox"/> Rollover | | |
| 258 | | 232 | | 338 | | |
| <input type="checkbox"/> Front Office | | <input type="checkbox"/> Ball Mill | | <input type="checkbox"/> Maint. Shop | | |
| 344 | | 221 | | 206 | | |
| <input type="checkbox"/> Calciners | | <input type="checkbox"/> Mobile Shop | | <input type="checkbox"/> Silica | | |
| 397#4,249N | | 222 | | 224,225,226 | | |
| <input type="checkbox"/> Compressor | | <input type="checkbox"/> NE Maint. | | <input checked="" type="checkbox"/> SPA Filter | | |
| 423 | | 412,251 | | 370 | | |
| <input type="checkbox"/> Chem. Bldg. | | <input type="checkbox"/> Phos Acid | | <input type="checkbox"/> North Sulfuric | | |
| 211 | | 345,371 | | 359 | | |
| Nature of injuries | | | | | | |
| <input checked="" type="checkbox"/> None | | <input type="checkbox"/> Thermal burn | | <input type="checkbox"/> Laceration | | |
| <input type="checkbox"/> Fall | | <input type="checkbox"/> Chem. Burn | | <input type="checkbox"/> Other | | |
| Area of body affected | | | | | | |
| <input type="checkbox"/> Eyes | | <input type="checkbox"/> Arms | | <input type="checkbox"/> Back | | |
| <input type="checkbox"/> Face & Head | | <input type="checkbox"/> Hands | | <input type="checkbox"/> Legs | | |
| <input type="checkbox"/> Neck | | <input type="checkbox"/> Chest | | <input type="checkbox"/> Feet | | |
| Do we Need? | | | | | | |
| <input type="checkbox"/> Ambulance | | <input type="checkbox"/> Evacuation | | <input type="checkbox"/> Emergency Responce Team | | |
| <input type="checkbox"/> Other | | <input checked="" type="checkbox"/> X | | <input type="checkbox"/> None | | |
| Wind direction & Speed | | <div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West ← ○ → 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div> | | | | |
| MPH <input type="checkbox"/> 0 Direction | | | | | | |
| Cross out area that the wind is coming from. | | | | | | |
| This will tell where to send the people to. | | | | | | |
| Send to Zone <input type="checkbox"/> 3 No wind send to Zone 3 | | | | | | |
| Filled out by: | | Brian Rowland | | | | |
| Visual check: | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/4/2002

TIME: 14:10

updated 1/13/02

| | | | | | | | | | |
|---|--|--|--|--|-------------------------------------|---|-------------------------------------|--------------|-------------------------------------|
| ANSWERED: | | | | <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <input checked="" type="checkbox"/> | <i>Guard</i> | <input checked="" type="checkbox"/> |
| Name of person calling: | | | | Richard Hymas | | Was 333 called? | | Yes | |
| Nature of emergency | | | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Sulfuric Acid Release | | Number of people injured Amount <input checked="" type="checkbox"/> Unknown | | | |
| Detailed Comments: | | | | Leaking Flange on sulfuric acid transfer line. | | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input checked="" type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | | | | | | |
| Nature of injuries | | | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | | |
| Area of body affected | | | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | | |
| Do we Need? | | | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> X | | | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | | Send to Zone 4 0 North Send to Zone 1 270 West ← → 90 East Send to Zone 3 180 South Send to Zone 2 | | | | | |
| Filled out by: | | | | Steve Moore | | | | | |
| Visual check: | | | | | | | | | |

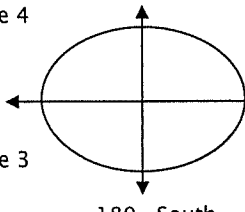
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/4/2002

TIME: 14:25

updated 1/13/02

| | | | | | | | | | |
|---|--|--|--|--|---|--|------------------------|----------------------|-----|
| ANSWERED: | | | | Lab | X | Safety | X | Guard | X |
| Name of person calling: | | | | Matt Thomas | | | Was 333 called? | | Yes |
| Nature of emergency | | | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion | | Number of people injured Pond Water Release | | Amount X 200 Gal. | |
| Detailed Comments: The gyp sump overflowed. | | | | | | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Calciners 397#4,249N 222 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> North Sulfuric 359 <input type="checkbox"/> Chem. Bldg. 211 <input checked="" type="checkbox"/> Phos Acid 345,371 | | | | | | | | | |
| Nature of injuries | | | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration | | <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | |
| Area of body affected | | | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back | | <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs | | | |
| | | | | <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | | |
| Do we Need? | | | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team | | <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> X | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | | Send to Zone 4  Send to Zone 1 Send to Zone 3 Send to Zone 2 | | | | | |
| Filled out by: Steve Moore | | | | | | | | | |
| Visual check: | | | | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/5/2002

TIME: 1135

updated 1/13/02

| | | | | | | | | | | | |
|---|--|--|-------------------------------------|---------------|-------------------------------------|--------------|-------------------------------------|--|--|---|--|
| ANSWERED: | | <i>Lab</i> | <input checked="" type="checkbox"/> | <i>Safety</i> | <input checked="" type="checkbox"/> | <i>Guard</i> | <input checked="" type="checkbox"/> | | | | |
| Name of person calling: | | Scott Stewart | | | Was 333 called? | | Yes | | | | |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | | Number of people injured 0 lbs. | | Amount | | | | |
| Detailed Comment: A truck driver (Darrel Parson truck 458) was moving his truck forward to fill the pup when another truck driver (Matt Peeler) hit the start button, spilling 450lbs. Of PPA in the containment area. | | | | | | | | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Pond <input checked="" type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> Front Office <input type="checkbox"/> E & I 258 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Compressor 423 <input type="checkbox"/> Chem. Bldg. 211 | | | | | | | | <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> North Sulfuric 359 | | <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Washed Reclaim 236 | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | | | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Face & Head <input type="checkbox"/> Neck <input type="checkbox"/> Arms <input type="checkbox"/> Hands <input type="checkbox"/> Chest <input type="checkbox"/> Back <input type="checkbox"/> Legs <input type="checkbox"/> Feet | | | | | | | | | |
| Do we Need? | | <input checked="" type="checkbox"/> No Ambulance <input checked="" type="checkbox"/> No Evacuation <input checked="" type="checkbox"/> No Emergency Response Team <input type="checkbox"/> Other | | | None | | | | | | |
| Wind direction & Speed 7 MPH Direction SW Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | Send to Zone 4 270 West Send to Zone 3 Send to Zone 1 90 East Send to Zone 2 180 South | | | | | | | | | |
| Filled out by: | | H.H.Hazelett | | | | | | | | | |
| Visual check: | | | | | | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/18/2002

TIME: 1508

updated 1/13/02

| | | | | | | |
|--|--|--|--|---|---------------------------------|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Mick Potter | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | Amount Unknown |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | | |
| Detailed Comments: | | A Release of Condesate and phos acid. | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input checked="" type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> Ball Mill 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> X <input type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 3 Direction south Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | Send to Zone 4 0 North Send to Zone 1 270 West 90 East Send to Zone 3 180 South Send to Zone 2 | | | | |
| Filled out by: Howard Johnson | | | | | | |
| Visual check: North to South | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/18/2002

TIME: 0745

updated 1/13/02

| | | | | | | |
|---|--|---|--|--|---|--|
| ANSWERED: | | | | <input checked="" type="checkbox"/> <i>Lab</i> | <input checked="" type="checkbox"/> <i>Safety</i> | <input checked="" type="checkbox"/> <i>Guard</i> |
| Name of person calling: Brett Hymas | | | | Was 333 called? Yes | | |
| Nature of emergency | | <input type="checkbox"/> <i>Accident</i> | | <input type="checkbox"/> <i>Number of people injured</i> | | |
| | | <input type="checkbox"/> <i>Fire</i> | | <input type="checkbox"/> <i>Explosion</i> | | <input checked="" type="checkbox"/> <i>Release</i> |
| Detailed Comments: | | Thermal spill from #1 super unit | | | | |
| Area of emergency | | | | | | |
| <input type="checkbox"/> <i>Dap, Gran</i> | | <input type="checkbox"/> <i>Phos Maint.</i> | | <input type="checkbox"/> <i>East Sulfuric</i> | | |
| 227 | | 282 | | 358 | | |
| <input type="checkbox"/> <i>Pond</i> | | <input type="checkbox"/> <i>DCS,PPA</i> | | <input type="checkbox"/> <i>Product Ship.</i> | | |
| <input type="checkbox"/> <i>NH3 Sphere</i> | | 283,266,279 | | 348 | | |
| <input type="checkbox"/> <i>Front Office</i> | | <input type="checkbox"/> <i>E & I</i> | | <input type="checkbox"/> <i>Rollover</i> | | |
| 258 | | 232 | | <input type="checkbox"/> <i>Ware House</i> | | |
| <input type="checkbox"/> <i>Ball Mill</i> | | <input type="checkbox"/> <i>Maint. Shop</i> | | <input type="checkbox"/> <i>Rubber Shop</i> | | |
| 344 | | 221 | | 206 | | |
| <input type="checkbox"/> <i>Calciners</i> | | <input type="checkbox"/> <i>Mobile Shop</i> | | <input type="checkbox"/> <i>Silica</i> | | |
| 397#4,249N | | 222 | | 224,225,226 | | |
| <input type="checkbox"/> <i>Compressor</i> | | <input type="checkbox"/> <i>NE Maint.</i> | | <input type="checkbox"/> <i>SPA Filter</i> | | |
| 423 | | 412,251 | | 370 | | |
| <input type="checkbox"/> <i>Chem. Bldg.</i> | | <input checked="" type="checkbox"/> <i>Phos Acid</i> | | <input type="checkbox"/> <i>North Sulfuric</i> | | |
| 211 | | 345,371 | | 359 | | |
| Nature of injuries | | <input checked="" type="checkbox"/> <i>None</i> | | <input type="checkbox"/> <i>Thermal burn</i> | | <input type="checkbox"/> <i>Laceration</i> |
| | | <input type="checkbox"/> <i>Fall</i> | | <input type="checkbox"/> <i>Chem. Burn</i> | | <input type="checkbox"/> <i>Other</i> |
| Area of body affected | | | | | | |
| <input type="checkbox"/> <i>Eyes</i> | | <input type="checkbox"/> <i>Arms</i> | | <input type="checkbox"/> <i>Back</i> | | |
| <input type="checkbox"/> <i>Face & Head</i> | | <input type="checkbox"/> <i>Hands</i> | | <input type="checkbox"/> <i>Legs</i> | | |
| <input type="checkbox"/> <i>Neck</i> | | <input type="checkbox"/> <i>Chest</i> | | <input type="checkbox"/> <i>Feet</i> | | |
| Do we Need? | | | | | | |
| <input type="checkbox"/> <i>Ambulance</i> | | <input type="checkbox"/> <i>Evacuation</i> | | <input type="checkbox"/> <i>Emergency Responce Team</i> | | |
| <input type="checkbox"/> <i>Other</i> | | <input checked="" type="checkbox"/> <i>None</i> | | | | |
| Wind direction & Speed | | <div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div> | | | | |
| MPH 6 Direction N | | | | | | |
| Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | | | | |
| Filled out by: J Connelly | | | | | | |
| Visual check: North to South | | | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/8/2002

TIME: 1455

updated 1/13/02

| | | | | |
|--|--|--|---------------------------------|--|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Doug Lau | | Was 333 called? Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | Number of people injured Amount 1500 gal |
| Detailed Comments: 1500 gal of 52% acid into contained area | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input checked="" type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 258 <input type="checkbox"/> E & I 232 <input type="checkbox"/> Rollover 338 <input type="checkbox"/> Front Office 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 397#4,249N 222 <input type="checkbox"/> Mobile Shop 224,225,226 <input type="checkbox"/> Silica 236 <input type="checkbox"/> Calciners 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 211 <input type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | |
| Nature of injuries <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 8 Direction 315 Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | | | |
| Filled out by: Cody Lowe | | | | |
| Visual check: | | | | |

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/9/2002

TIME: 1645

updated 1/13/02

| | | | | |
|--|--|--|---------------------------------|---|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Mike Willie | | |
| | | Was 333 called? <input checked="" type="checkbox"/> Yes | | |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | |
| | | Number of people injured _____ Amount 500 Gal | | |
| Detailed Comments: | | Spilled app. 500 gallons from 30 clarifier. | | |
| Area of emergency <input type="checkbox"/> Dap, Gran <input type="checkbox"/> Phos Maint. <input type="checkbox"/> East Sulfuric <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere <input type="checkbox"/> 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> Ball Mill <input type="checkbox"/> 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> 344 <input type="checkbox"/> Maint. Shop <input type="checkbox"/> Rubber Shop <input type="checkbox"/> Wash Plant <input type="checkbox"/> Calciners <input type="checkbox"/> 221 <input type="checkbox"/> 206 <input type="checkbox"/> 249,248 <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> Washed Reclaim <input type="checkbox"/> Compressor <input type="checkbox"/> NE Maint. <input type="checkbox"/> SPA Filter <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> Chem. Bldg. <input checked="" type="checkbox"/> Phos Acid <input type="checkbox"/> North Sulfuric <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | |
| Filled out by: | | Daren Maughan | | |
| Visual check: | | | | |

Agrium CPO

TIME: 1304

| | | | |
|--|----------------------------|---------------------------------|--|
| ANSWERED: <u>Lab</u> X <u>Safety</u> <u>Guard</u> X | | | |
| Name of person calling: | | Was 333 called? | yes |
| Nature of emergency | <u>Accident</u> | <u>Number of people injured</u> | |
| | <u>Fire</u> | <u>Explosion</u> | <u>Release</u> x <u>60 Gal.</u> |
| Detailed Comment: An operator found an unknown substance coming out of the ground by tank 12. | | | |
| Area of emergency | <u>Dap, Gran</u> | <u>Phos Maint.</u> | <u>East Sulfuric</u> |
| | <u>227</u> | <u>282</u> | <u>358</u> |
| <u>Pond</u> | <u>DCS,PPA</u> | <u>Product Ship.</u> | <u>West Sulfuric</u> |
| <u>NH3 Sphere</u> | <u>283,266,279</u> | <u>348</u> | <u>346</u> |
| <u>Front Office</u> | <u>E & I</u> | <u>Rollover</u> | <u>Ware House</u> |
| | <u>258</u> | <u>232</u> | <u>338</u> |
| <u>Ball Mill</u> | <u>Maint. Shop</u> | <u>Rubber Shop</u> | <u>Wash Plant</u> |
| <u>344</u> | <u>221</u> | <u>206</u> | <u>249,248</u> |
| <u>Calciners</u> | <u>Mobile Shop</u> | <u>Silica</u> | <u>Washed Reclaim</u> |
| <u>397#4,249N</u> | <u>222</u> | <u>224,225,226</u> | <u>236</u> |
| <u>Compressor</u> | <u>NE Maint.</u> | <u>SPA Filter</u> | |
| <u>423</u> | <u>412,251</u> | <u>370</u> | |
| <u>Chem. Bldg.</u> X | <u>Phos Acid</u> | <u>North Sulfuric</u> | |
| <u>211</u> | <u>345,371</u> | <u>359</u> | |
| Nature of injuries | X <u>None</u> | <u>Thermal burn</u> | <u>Laceration</u> |
| | <u>Fall</u> | <u>Chem. Burn</u> | <u>Other</u> |
| Area of body affected | <u>Eyes</u> | <u>Arms</u> | <u>Back</u> |
| | <u>Face & Head</u> | <u>Hands</u> | <u>Legs</u> |
| | <u>Neck</u> | <u>Chest</u> | <u>Feet</u> |
| Do we Need? | <u>No</u> <u>Ambulance</u> | <u>No</u> <u>Evacuation</u> | <u>No</u> <u>Emergency Response Team</u> |
| | <u>Other</u> | | <u>None</u> |
| Wind direction & Speed | <u>6 MPH</u> | <u>Direction</u> | |
| Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <u>No wind send to Zone 3</u> | | | |
| Filled out by: <u>Hubert Hazelett</u> | | | |
| Visual check: | | | |

Agrium CPO

updated 1/13/02

NUW 006183

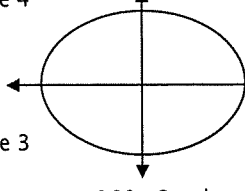
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/2/2002

TIME: 1448

updated 1/13/02

| | | | | |
|---|--|--|---|---|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Brett Hymass | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | Amount 100gal |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | |
| Detailed Comments: Pond Water Spilled @ Phos Scrubber Containment Area | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> Mobile Shop 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input checked="" type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | |
| | <input type="checkbox"/> Fall | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | |
| Area of body affected | <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | |
| | <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | |
| | <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | |
| Do we Need? <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 2 Direction South Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | Send to Zone 4 0 North Send to Zone 1 90 East Send to Zone 2 180 South Send to Zone 3 270 West  | | |
| Filled out by: John Connelly | | | | |
| Visual check: South to North | | | | |

Agrium CPO

updated 1/13/02

NUW 006185

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/7/2002

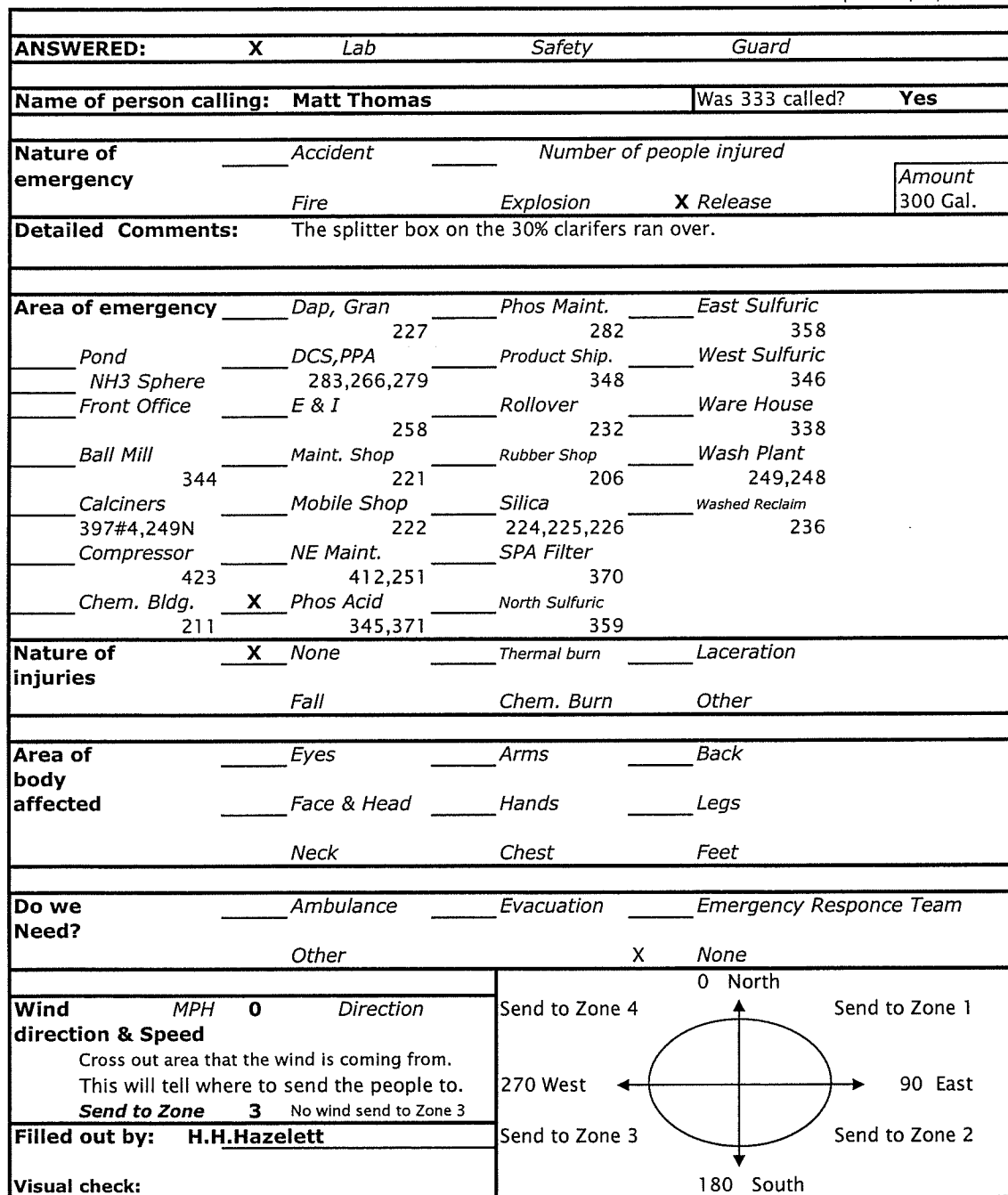
TIME: 1543

updated 1/13/02

| | | | | | | |
|---|--|--|--|---|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Eric Passey | | Was 333 called? Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | Number of people injured Amount 150 gal | | |
| Detailed Comments: | | 42% acid west side of containment wall by tk41 | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Calciners 397#4,249N <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 423 <input checked="" type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 <input type="checkbox"/> Chem. Bldg. 211 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Responce Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | Send to Zone 4 270 West Send to Zone 3 0 North Send to Zone 1 90 East Send to Zone 2 180 South | | | | |
| Filled out by: | | Cody Lowe | | | | |
| Visual check: | | | | | | |

Agrium CPO

updated 1/13/02



EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/27/2002

TIME: 1125

updated 1/13/02

| | | | | | | |
|--|--|--|--|---|--|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | | | Darell Wright | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | <input type="checkbox"/> Amount |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | | <input checked="" type="checkbox"/> Release |
| Detailed Comments: | | jack hammering around tk51 area and acid started coming up from ground. | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input type="checkbox"/> DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> Ball Mill <input type="checkbox"/> Maint. Shop 258 <input type="checkbox"/> Rubber Shop 232 <input type="checkbox"/> Wash Plant 338 <input type="checkbox"/> 344 <input type="checkbox"/> 221 <input type="checkbox"/> 206 <input type="checkbox"/> 249,248 <input type="checkbox"/> Calciners <input type="checkbox"/> Mobile Shop <input type="checkbox"/> Silica <input type="checkbox"/> Washed Reclaim <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> 236 <input type="checkbox"/> Compressor <input type="checkbox"/> NE Maint. <input checked="" type="checkbox"/> SPA Filter <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> Chem. Bldg. <input type="checkbox"/> Phos Acid <input type="checkbox"/> North Sulfuric <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None | | <input type="checkbox"/> Thermal burn | | <input type="checkbox"/> Laceration |
| | | <input type="checkbox"/> Fall | | <input type="checkbox"/> Chem. Burn | | <input type="checkbox"/> Other |
| Area of body affected | | <input type="checkbox"/> Eyes | | <input type="checkbox"/> Arms | | <input type="checkbox"/> Back |
| | | <input type="checkbox"/> Face & Head | | <input type="checkbox"/> Hands | | <input type="checkbox"/> Legs |
| | | <input type="checkbox"/> Neck | | <input type="checkbox"/> Chest | | <input type="checkbox"/> Feet |
| Do we Need? | | <input type="checkbox"/> Ambulance | | <input type="checkbox"/> Evacuation | | <input type="checkbox"/> Emergency Responce Team |
| | | <input type="checkbox"/> Other | | <input checked="" type="checkbox"/> X | | <input type="checkbox"/> None |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | Send to Zone 4 0 North Send to Zone 1 270 West ← → 90 East Send to Zone 3 180 South Send to Zone 2 | | | | |
| Filled out by: David Hirsbrunner | | | | | | |
| Visual check: | | | | | | |

Agrium CPO

TIME: 2205

| | | | | | | |
|---|--|--|------------|---------------|--|--------------|
| ANSWERED: | | X | <i>Lab</i> | <i>Safety</i> | X | <i>Guard</i> |
| Name of person calling: | | Bryce Crane | | | Was 333 called? | Yes |
| Nature of emergency | | <input type="checkbox"/> Accident <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input checked="" type="checkbox"/> Release | | | Number of people injured Amount 15 gal | |
| Detailed Comments: | | Solvent was spilled in PPA plant a couple days ago (0630 12/08/2002) | | | | |
| Area of emergency | | <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. <input type="checkbox"/> West Sulfuric <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> 348 <input type="checkbox"/> 346 <input type="checkbox"/> Front Office E & I <input type="checkbox"/> Rollover <input type="checkbox"/> Ware House <input type="checkbox"/> 258 <input type="checkbox"/> 232 <input type="checkbox"/> 338 <input type="checkbox"/> Ball Mill <input type="checkbox"/> Maint. Shop <input type="checkbox"/> Rubber Shop <input type="checkbox"/> Wash Plant <input type="checkbox"/> 344 <input type="checkbox"/> 221 <input type="checkbox"/> 206 <input type="checkbox"/> 249,248 <input type="checkbox"/> Calciners <input type="checkbox"/> Mobile Shop <input type="checkbox"/> Silica <input type="checkbox"/> Washed Reclaim <input type="checkbox"/> 397#4,249N <input type="checkbox"/> 222 <input type="checkbox"/> 224,225,226 <input type="checkbox"/> 236 <input type="checkbox"/> Compressor <input type="checkbox"/> NE Maint. <input type="checkbox"/> SPA Filter <input type="checkbox"/> 423 <input type="checkbox"/> 412,251 <input type="checkbox"/> 370 <input type="checkbox"/> Chem. Bldg. <input type="checkbox"/> Phos Acid <input type="checkbox"/> North Sulfuric <input type="checkbox"/> 211 <input type="checkbox"/> 345,371 <input type="checkbox"/> 359 | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other | | | | |
| Area of body affected | | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet | | | | |
| Do we Need? | | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3 | | 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South | | | | |
| Filled out by: | | J W Connelly | | | | |
| Visual check: | | | | | | |

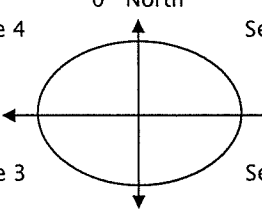
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/18/2002

TIME: 0140

updated 1/13/02

| | | | | |
|---|--|---|---|---|
| ANSWERED: | | <input checked="" type="checkbox"/> Lab | <input type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: | | Kym Crosley | | Was 333 called? <input checked="" type="checkbox"/> Yes |
| Nature of emergency | <input type="checkbox"/> Accident | <input type="checkbox"/> Number of people injured | | Amount app. 100 Gal. |
| | <input type="checkbox"/> Fire | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | |
| Detailed Comments: TBP spill at PPA Plant | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond <input checked="" type="checkbox"/> DCS,PPA 283,266,279 <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input type="checkbox"/> Front Office <input type="checkbox"/> E & I 258 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Calciners 397#4,249N 222 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> North Sulfuric 359 <input type="checkbox"/> Chem. Bldg. 211 <input type="checkbox"/> Phos Acid 345,371 | | | | |
| Nature of injuries | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Thermal burn | <input type="checkbox"/> Laceration | |
| | <input type="checkbox"/> Fall | <input type="checkbox"/> Chem. Burn | <input type="checkbox"/> Other | |
| Area of body affected | <input type="checkbox"/> Eyes | <input type="checkbox"/> Arms | <input type="checkbox"/> Back | |
| | <input type="checkbox"/> Face & Head | <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | |
| | <input type="checkbox"/> Neck | <input type="checkbox"/> Chest | <input type="checkbox"/> Feet | |
| Do we Need? <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team <input type="checkbox"/> Other <input checked="" type="checkbox"/> None | | | | |
| Wind direction & Speed MPH 0 Direction Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3 | | Send to Zone 4  Send to Zone 1 Send to Zone 3 Send to Zone 2 | | |
| Filled out by: Daren Maughan | | | | |
| Visual check: | | | | |

Agrium CPO

updated 1/13/02

NUW 006191

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/20/02

TIME: 1100

updated 1/13/02

| | | | | | | |
|---|--|---|--|---|---|---|
| ANSWERED: | | | | <input checked="" type="checkbox"/> Lab | <input checked="" type="checkbox"/> Safety | <input checked="" type="checkbox"/> Guard |
| Name of person calling: Brad Taylor | | | | Was 333 called? | | Yes |
| Nature of emergency | | <input type="checkbox"/> Accident | | <input type="checkbox"/> Number of people injured | | |
| | | <input type="checkbox"/> Fire | | <input type="checkbox"/> Explosion | <input checked="" type="checkbox"/> Release | Amount Unknown |
| Detailed Comments: | | Broken gas line by admin building | | | | |
| Area of emergency <input type="checkbox"/> Dap, Gran 227 <input type="checkbox"/> Phos Maint. 282 <input type="checkbox"/> East Sulfuric 358 <input type="checkbox"/> Pond DCS,PPA <input type="checkbox"/> Product Ship. 348 <input type="checkbox"/> West Sulfuric 346 <input checked="" type="checkbox"/> NH3 Sphere 283,266,279 <input type="checkbox"/> Rollover 232 <input type="checkbox"/> Ware House 338 <input checked="" type="checkbox"/> Front Office E & I 258 <input type="checkbox"/> Ball Mill 344 <input type="checkbox"/> Maint. Shop 221 <input type="checkbox"/> Rubber Shop 206 <input type="checkbox"/> Wash Plant 249,248 <input type="checkbox"/> Calciners 397#4,249N 222 <input type="checkbox"/> Silica 224,225,226 <input type="checkbox"/> Washed Reclaim 236 <input type="checkbox"/> Compressor 423 <input type="checkbox"/> NE Maint. 412,251 <input type="checkbox"/> SPA Filter 370 <input type="checkbox"/> Chem. Bldg. 211 <input type="checkbox"/> Phos Acid 345,371 <input type="checkbox"/> North Sulfuric 359 | | | | | | |
| Nature of injuries | | <input checked="" type="checkbox"/> None | | <input type="checkbox"/> Thermal burn | | <input type="checkbox"/> Laceration |
| | | <input type="checkbox"/> Fall | | <input type="checkbox"/> Chem. Burn | | <input type="checkbox"/> Other |
| Area of body affected | | <input type="checkbox"/> Eyes | | <input type="checkbox"/> Arms | | <input type="checkbox"/> Back |
| | | <input type="checkbox"/> Face & Head | | <input type="checkbox"/> Hands | | <input type="checkbox"/> Legs |
| | | <input type="checkbox"/> Neck | | <input type="checkbox"/> Chest | | <input type="checkbox"/> Feet |
| Do we Need? | | <input type="checkbox"/> Ambulance | | <input type="checkbox"/> Evacuation | | <input checked="" type="checkbox"/> Emergency Response Team |
| | | <input type="checkbox"/> Other | | <input type="checkbox"/> None | | |
| Wind direction & Speed MPH 7 Direction 135 Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 2 No wind send to Zone 3 | | Send to Zone 4 270 West Send to Zone 3 0 North Send to Zone 1 90 East Send to Zone 2 180 South | | | | |
| Filled out by: Cody Lowe | | | | | | |
| Visual check: South to North | | | | | | |